



100 Second Street  
 Troy, New York 12180  
 Phone: (518) 274-7071  
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# FACILITY USE APPLICATION

Please read over the Library Use Policy prior to filling out this application  
 (PLEASE PRINT)

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME OF ORGANIZATION: \_\_\_\_\_

YOUR TITLE/POSITION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

PLEASE MARK THE APPROPRIATE BOX:	
<input type="checkbox"/> Meeting <input type="checkbox"/> Exhibit <input type="checkbox"/> Demonstration <input type="checkbox"/> Workshop <input type="checkbox"/> Lecture <input type="checkbox"/> Seminar <input type="checkbox"/> Debate	<input type="checkbox"/> Film <input type="checkbox"/> Concert <input type="checkbox"/> Literature Reading <input type="checkbox"/> Performance <input type="checkbox"/> Reception <input type="checkbox"/> Slide Presentation <input type="checkbox"/> Other: _____

DATES - THE TIME USE	
DATE:	_____
TIMES:	_____
RAIN DATE:	_____
TIMES:	_____

RECURRING USE: (Please write in the dates and times you are requesting)

PLEASE ANSWER THE FOLLOWING:
Will you need audio visual equipment?
What type of equipment?
Will your program or exhibit be open to the public?
Is advance registration required?
Who is the intended audience?
Will you need assistance with publicity?
Would you like the library to put up a book display related to your program or exhibit?

*I have read and understood the Troy Public Library's facilities use policy and agree to comply with it.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE RETURN THIS FORM TO :  
 ADULT PROGRAMMING LIBRARIAN  
 TROY PUBLIC LIBRARY  
 100 SECOND STREET  
 TROY, NY 12180