



A registration form indicating the organization's purpose, intended use of meeting rooms, and organization's contact person (name, address, and telephone numbers - day and evening) must be on file with the Louisville Free Public Library. **Please keep this information updated as changes occur.**

***All Meetings held in the library's meeting rooms must be free and open to the public***

Today's Date:

Organization Name:

Purpose of Organization:

Date(s) of Meeting(s):

Meeting(s) Begin Time:

Meeting(s) End Time:

Intended Use and Special Requests:

Location to be used:

Main:

Branch\*:



Number of persons expected at meeting:

Name of Contact Person:

Organization Address and Zip Code:

E-mail:

Phone Number (day):

Phone Number (evening):

The meeting will be free and open to the public. (This must be checked in order for your group to meet)

I understand the policies for use of any meeting room of the Louisville Free Public Library. I understand that our use of the meeting room may be cancelled if these policies are not followed.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Title (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Submitting this form does not confirm your meeting. You will be contacted using the information you provided to confirm your meeting room reservation date and time.**