

Meeting Space Reservation Request

South Burlington Public Library - 155 Dorset Street, University Mall - 802-846-4140

Please complete and email this form to jmurray@southburlingtonvt.gov

The room may only be reserved up to 3 months in advance.

Title of Event or Meeting	ng			
Contact Person				
Organization				
Address				
Email				
				group? □ Yes □ No
Event Date(s)				
Number of Attendees _				
Do you need a □ Lapto	op □ Projector?			
Requested Set Up Tim	ıe	Start Time	E	nd Time
Will there be catering/f	ood for this event?	P □ Yes □ No		
I have read the Facility R therein. Please note that event and clean-up suffic drinks and materials.	the contact person	listed on this form is r	esponsible for	
Signature of Applicant				
		Date	e	_
Request Approved and	I Confirmed			
		Staff Initials	Da	te
Individuals and for-profits Minimum 2 hour use \$25 Payments can be made to to The South Burlington	5.00. Half day use via credit card or by	\$50.00. Full day u	se \$100.00.	Checks should be made out
to The Godul Builington	LIDIGITY			
Payment Received				
	Staff Initials	D	ate	
Additional Notes:				