

Shelby County Public Library - *Shelbyville Branch*
57 W. Broadway, Shelbyville, IN 46176
Phone: 317-398-7121 FAX: 317-421-2758

Outdoor Plaza Application

Name of Organization or Individual

Holding the event:

Fees: (check all applicable) Non- Profit (private): _____ (\$150) _____ 5+ Hours (\$50) For-Profit/Non-Profit (Charging for Event) _____ (\$200) _____ 5+ Hours (\$50) Staff hrs. _____ (\$20 per hr) Tech Equip. fee _____ (\$10)	<u>FOR OFFICE USE ONLY</u> Amt Pd: _____ Calendar: _____ Cash Check Card (Please Circle) Date Pd: _____ Computer: _____ Staff Initials: _____ Sent to office _____
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Contact person: _____

Phone #: _____

Position: _____

Address: _____

Person leading event: _____

Type of Event: _____

Date(s) of event: _____

Time: From: _____ **To:** _____

Time 2: From: _____ **To:** _____

After Hours: Need Staff member to work after hours _____

M-TH 9:00A.M.-8:45P.M. Fri 9:00 A.M.-6:45P.M. SAT. 9:00 A.M.-4:45P.M.

Equipment to be used & any special needs:

TECH Easel

#of People to Attend _____ **#of People Attended** _____

Please read the Meeting Room Policy before signing below:

Agreement

I, the undersigned, as a responsible representative of the organization making application for the library meeting facilities, do agree to abide by the attached rules and policies.

Printed Name _____ **Date** _____

Signature _____