



79 Main Street  
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**APPLICATION FOR LIBRARY COMMUNITY ROOM USE**

Name of Organization/Individuals \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title of Person making application: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Email \_\_\_\_\_

Date(s) Requested: \_\_\_\_\_

Hours to be used: \_\_\_\_\_

Purpose for which room is to be used: \_\_\_\_\_

Expected attendance: \_\_\_\_\_

Any special requirements or equipment needed? \_\_\_\_\_

Will refreshments be served? \_\_\_\_\_

Certificate of Liability Insurance \_\_\_\_\_ Indemnification Form \_\_\_\_\_

This application, if approved, entitles the organization to the use of the Community Room and restrooms only.

I have read and agree to abide by the policy and guidelines I have received from the Brewster Public Library on use of the library. My organization and I shall be responsible for any violation thereof or any damage to the library and its contents.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_