

**Eastern Monroe Public Library  
Annual Meeting Room Agreement Form 2026**

Please complete this form and submit it to the reference desk or email it to [reference@monroepl.org](mailto:reference@monroepl.org).  
(Please note that the 2027 reservation sign ups will begin in November, 2026.)

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**Point of Contact Information**

Name: \_\_\_\_\_  
Address (if different from group): \_\_\_\_\_  
Phone number: \_\_\_\_\_  
Email address (required): \_\_\_\_\_  
Do you have a Monroe County library card?:      Yes                  No  
If yes, library card # (must be active): \_\_\_\_\_

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**Group and Event Information**

Name of group: \_\_\_\_\_  
Address of group/organization (if applicable): \_\_\_\_\_  
\_\_\_\_\_  
Describe group/organization:

Describe meeting(s) purpose:

Is this a non-profit group?:      Yes                  No  
EIN (if applicable): \_\_\_\_\_  
Meeting Date(s): \_\_\_\_\_

Meeting Start Time: \_\_\_\_\_ Meeting End Time: \_\_\_\_\_  
Is this a recurring/periodic meeting?:      Yes                  No  
If yes, please describe (for example: "First Wednesday of each month"):

Expected number of attendees: \_\_\_\_\_ Room assigned (as per staff): \_\_\_\_\_  
Quantity of chairs preferred: \_\_\_\_\_ Quantity of tables preferred: \_\_\_\_\_  
Additional room equipment preferred:

(EMPL does not promise room set-up but will endeavor to ensure the tables, chairs, and room equipment are available)

↓ **Form continues on next page** ↓

**Awareness of Library Policies**

**PLEASE READ CAREFULLY**, then initial next to each statement indicating that you understand the following:

\_\_\_\_\_ I am aware that free use of the Eastern Monroe Public Library's meeting room facilities is only available to non-profit groups. All such meetings must be open to the public and free of charge. I agree to abide by all procedures and stipulations stated in the Eastern Monroe Public Library Use of Meeting Room/Library Facilities policy.

\_\_\_\_\_ I understand that my contact information may be used by the library staff to refer interested parties to the group I represent.

\_\_\_\_\_ I understand that there should be a representative from the group with a library card in good standing both to reserve the room and be present at the meeting.

\_\_\_\_\_ I agree to notify the reference desk staff in the event that a scheduled meeting must be canceled.

**Failure to do so on two or more occasions may result in suspension of meeting room privileges.**

\_\_\_\_\_ I understand the room should be left clean and ready for the next user.

\_\_\_\_\_ I understand that there is a minimum \$50.00 maintenance fee for any extra cleaning or damage to the room.

\_\_\_\_\_ Although the library will make every effort to honor all reservations, I understand that the library reserves the right to change room schedules. If the library closes due to weather or other emergencies, all meetings will be canceled. Notification of library closures will be made on the Eastern Monroe Public Library homepage ([www.monroepl.org](http://www.monroepl.org)) and Facebook page.

\_\_\_\_\_ I acknowledge that the Library does not permit the sale, advertising, or promotion of products or services, including events involving marketing or business solicitation, within its meeting rooms. I **understand that failure to comply with this policy may lead to the revocation of meeting room privileges.**

**Indemnification of EMPL**

The above-named group conducting a meeting or presenting a program on library premises will assume full responsibility for property damage or injuries sustained by its members or participants while on EMPL premises and for any harm or injury caused by its members/participants to others on the premises. The Eastern Monroe Public Library will be held harmless for such bodily injuries. Circumstances may require the library to request proof of insurance.

**By signing below, I understand and accept the terms of this agreement form.**

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**SECTION BELOW IS FOR LIBRARY INTERNAL USE ONLY - DO NOT FILL OUT THIS SECTION**

Entered in calendar: \_\_\_\_\_

Confirmed via email: \_\_\_\_\_

Staff initials: \_\_\_\_\_

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