

**Hemet Public Library Conference Room
300 E. Latham Avenue
Hemet, CA 92543
(909)765-3852**

**Request For The Use Of The Conference Room
Please Print or Type**

Date and time of requested event: _____

Name of Organization: _____

Type of Event: _____

Estimated Number in Attendance: _____

**Name of Person Responsible
for Organization:** _____

Relationship to Group: _____

Address: _____ **Telephone:** _____
(Will be given out to public if requested)

E-Mail Address: _____ **Fax:** _____

Address of Group: _____ **Telephone:** _____
(Will be given out to public if requested)

I have read the Conference Room Policy and agree to abide by the meeting room rules and regulations as listed. The undersigned assumes all and exclusive responsibility for the preservation of order and the sole and exclusive liability for any injury of persons, and damage to, or loss of property that may result from this use; and for the due observance of all regulations of the Board of Trustees of the Hemet Public Library and acknowledges receipt of the rules and regulations regarding the use of the meeting room.

Signature of Person Responsible for Organization **Date**

Signature of Staff Member **Date**

