Annie Halenbake Ross Lib	prary
232 West Main Street Lock Haven, PA 17745	
Phone: 570-748-3321	
Fax: 570-748-1050	
www.rosslibrary.org	Date:
Applic	cation Form for Use of Library Facilities
Name of Individual/Group: _	
Purpose of Meeting:	
Date(s) of Meeting(s):	Time:
Approximate attendance: _	
Library area requested:	
Equipment needed:	
Special requirements*:	or (ex: change in hours, question of fee schedule, etc.
Set up of room:	
Contact Person:	
Address:	
Phone:	
	rees to abide by the policy of the Ross Library and to accept responsibility for
Signature of contact person	Date
Fee Schedule:	
\$50.00 Rebecca F. Gro	ss Community Room (whole room)
\$30.00 Rebecca F. Gro	ss Community Room (half room)
	nference equipment to be negotiated; minimum \$115.00/hour eo Conference Policy)
\$25.00 Crocker Room a	and Sloan Meeting Room
\$10.00 Non-profit use	
For profit use – 10% of room fee	sales/proceeds to businesses/individuals selling items PLUS