

**Parsippany Library
Contract and Application for Meeting Room Use – Main Library**

Complete all three pages. Please print. Library Card # _____

Organization _____

Purpose of Meeting _____

Address _____ City _____ Zip _____

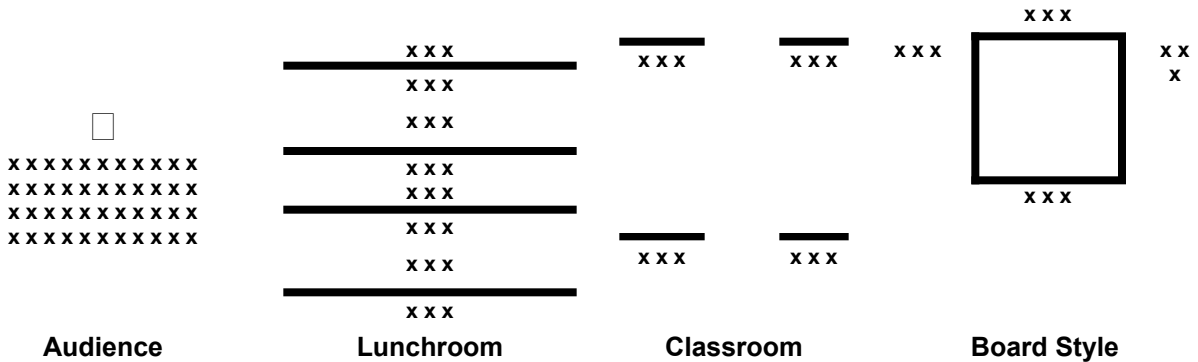
Group Contact Person _____ E-mail _____

Contact Phone _____ Fax _____

Date(s) Requested _____

Meeting Time _____ to _____ Number of People Expected _____

Room set-up is done by library staff. In order to provide you with the necessary space, indicate what type of room set-up you will be using (circle one) and how many tables you will need. # of Tables _____



Note: Only 3 chairs will fit per side of each table. A maximum of 10 tables may be available.

Do you need to use library equipment? Yes No If yes, please specify on the reverse side of this form.

Send this form to:

Parsippany Library, 449 Halsey Rd, Parsippany, NJ 07054, Attn: Jean Marie Embler

OR email to jean.embler@parsippanylibrary.org

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Office Use: Meeting Room A Meeting Room B Board Room Equipment

____ Approved ____ Approved, but please note date changes

____ Sorry, but the group does not meet the criteria stated in the agreement paragraph. The PAL Building may have available space. Contact PAL at 973-335-0555.

Rev. 11-22-21

Meeting Room Cost Assessment Page

Name of Group: _____

A. How would you classify your group?

Non-profit, Parsippany based – 50% of members live or work in Parsippany (\$0) \$ _____

Multiple use fee: \$ _____

- If a Non-profit meets less than 6 or fewer times in a 6 month period, there is no fee (\$0)
- If a Non-profit meets 7 – 15 times in a 6 month period, there is a fee of \$50.00 for that 6 month period
- If Non-profit meets 16 or more times in a 6 month period, there is a fee of \$100.00 for that 6 month period.

Non-profit, non-Parsippany based (\$75/hr) \$ _____

For profit (\$125/hr) \$ _____

B. Do you need to use equipment?

No (\$0) Yes (staff fee \$25) \$ _____

Please circle equipment needed

Screen DVD player/projector podium overhead projector laptop & projector

All groups, including non-profits, will be charged a \$25 staff fee for use of audio-visual equipment. In order to use the library's equipment and to make sure that it works with any electronic equipment and documents, the group facilitator **must** set up an appointment with the library concierge prior to the meeting date.

C. Do you need to meet after hours?

No (\$0) Yes (staff fee \$25) \$ _____

Make check payable to Parsippany Library.

Total A-C _____

Deposit Fee

Meeting room deposit fee (refundable check) _____ \$50

Please make out a separate \$50 refundable deposit check to Parsippany Library.

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I certify that the group I represent is a governmental, non-profit, civic, cultural or educational organization or that the meeting to be presented is of an educational or cultural nature. Neither I nor my organization will in any way advertise, either verbally or in writing, or suggest or imply that the library is

the host, the endorser or in any other way associated with this organization. I will abide by all library rules and regulations. In case of inclement weather, the meeting room group is responsible for calling the Library or checking the Library's website, www.parsippanylibrary.org, to determine if the Library has a delayed opening or will be closed for the day.

Signed: _____ Approved: _____
(contact person/group representative) (Library Director)

PAYMENT IS DUE AT THE TIME OF APPLICATION.

***Send checks to:* Parsippany Library, Attention Jean Marie Embler
449 Halsey Road, Parsippany, NJ 07054**