Garrard County Public Library Application for Use of the Library Community Room

This form must be completed by the organization and approved by the Library Director before a meeting can be scheduled.

Organi	zation's Name:
Organi	zation's Address:
Repres	entative Name:
Phone	Number:
What	is your organization's Primary Purpose/Mission?
1.	Is this a non-profit organization
2.	Will the purpose of the meetings/programs held in the room be civic, cultural, informational or educational?
3.	Will the purpose of the meetings/programs held in the room be commercial, for-profit religious or partisan?
4.	Will the purpose of the meetings/programs held in the room be private social events?
5.	Will the meetings/programs held in the room be free and open to the public?
6.	Will food and or drinks be served?
Repres	sentative's Signature
Date a	nd Time of meeting(s)
Appro	ved Denied Reason:

Return to: Laura McWilliams, Director Garrard County Public Library 101 Lexington Street Lancaster, KY 40444 859-792-3424 (phone)/ 859-792-2366 (fax) garrardlibrary@gmail.com