



1 Lafayette Square, Buffalo, NY 14203 716-858-8900

CENTRAL LIBRARY

APPLICATION/FEE STRUCTURE FOR FACILITY USE — MEETING ROOMS & TABLES

Rooms/tabling available for use at the downtown Central Library include:

- Central Meeting Room (100 person capacity)
- Collections Gallery Conference Room (68 person capacity)
- West Room (49 person capacity)
- Ring of Knowledge (50 person capacity)
- Information tables

ALL programs/events must be open to the public and be held during the Library's regular, open business hours.

All meeting rooms are ADA-compliant.

Library patrons must follow all security, health and safety policies required by the Buffalo & Erie County Public Library. For security purposes, everyone must go through a weapons detection system to enter the Library.

Refreshments: The serving of any/all refreshments must be preapproved by the Library as stated in the *Facility Use Policy, Section II. D. #7.*

There are no fees for tabling by non-profit organizations.

Use of meeting room is free, **unless:**

- Presenter is charging a fee to attendees (*see fee structure below*)

FEES

If an admission is being charged:

- Use of the room is \$100 per day

Additional fees may apply based on event needs and anticipated attendance.

Submit application at least three (3) weeks prior to program date.

Allow two weeks for processing. A copy with your confirmation signed by the Library will be returned to you. If the organization is required to pay a rental fee, the application must be accompanied by a non-refundable deposit of \$50.00 (cash, money order, certified check or credit card) payable to: Buffalo & Erie County Public Library. Deposit will be returned if application is denied. **Approval for use of the meeting space is not confirmed until the Application is signed by the Library director/designee and any payment/deposit, if required, has been made.**

• QUESTIONS: 716-858-7180 or 716-858-7182 •



CENTRAL LIBRARY APPLICATION FOR FACILITY USE—MEETING ROOMS & TABLES

Rooms/tabling available at the downtown Central Library include:

- ☐ Central Meeting Room (100 person capacity)
- ☐ Collections Gallery Conference Room (68 person capacity)
- ☐ Ring of Knowledge (50 person capacity)
- ☐ West Room (49 person capacity)
- ☐ Tabling on main floor

Organization name: _____

Organization address: _____

Purpose of organization: _____

Organization is (select one): ____ Non-Profit ____ For-Profit ____ Government Agency

Name & title of individual applicant: _____

Telephone number: (____) _____ Email address: _____

Program name as it should appear on public calendar: _____

Date requested (day of week, month, date and year): _____

☐ Recurring meeting? Expected attendance: _____

Reservation start time: _____ Program start time: _____ Program end time: _____ Reservation end time: _____

Describe program: (Attach additional sheet if necessary.) _____

Are you charging a fee to attendees? _____ If yes, what is the fee? _____

Is registration required? _____ If yes, how can people register? _____

Does your organization require any special accommodations? If yes, please list: _____

LIBRARY EQUIPMENT is limited. Please check items needed:

☐ LCD projector ☐ Screen ☐ Podium ☐ Microphone ☐ Laptop

☐ Tables (60"). Number needed: _____ ☐ Chairs. Number needed: _____

Indicate preferred arrangement of all equipment, tables, and chairs: _____

Nothing may be applied to walls, windows, or other surfaces.

SPECIAL EQUIPMENT (to be brought in by applicant): _____

Contact library in advance to arrange for delivery.

☐ I agree that I have read the Buffalo & Erie County Public Library's *Rules of Conduct* and *Facility Use Policy* and agree, on behalf of the applying organization, to be bound by the terms of use set forth therein, including acceptance of liability for personal injury, damage to Library facilities, and/or loss of Library property arising from use of the facility space by the applicant. I understand I do not have approval for use of the facility space until I receive a copy of this contract signed by the library director or designee and, if required, my payment or deposit has been made.

☐ I agree that my organization and all attendees will follow all security, health and safety policies required by the Buffalo & Erie County Public Library.

Name: _____ Date: _____

Signature: _____ Name of organization: _____

Library Use Only Application (circle one): Approved or Rejected. Signed by Library: _____ Date: ____/20__

Fee: \$_____ (see fee rates pg. 1) Deposit paid: _____ Balance due: _____ Paid: _____