ONSLOW COUNTY PUBLIC LIBRARY
Application for Use of the Meeting Room

Date(s) Requested: _____ Times(s) Requested: _____

Check your selection: Main Library/Jacksonville _____ Sneads Ferry _____ Swansboro _____

Name of Person, Group or Organization:

_____

Name of Group Representative: _____

Mailing Address: _____

City, State, Zip: _____

Phone:_____ Email: _____

Government or Non-Profit Organization? Yes ____ No ____ (Please note: There is a $25 fee for all other organizations.)

Will you be charging any fees at your meeting/event/activity? Yes _____ No _____

Purpose of meeting/event/activity: _____

_____

If applicable, provide a brief description of exhibit materials or literature: _____

_____

(Please note: The meeting rooms in Jacksonville, Sneads Ferry, and Swansboro are equipped with a TV monitor that can be connected to a device through HDMI, Apple TV or AirParrot for presentations. Any other equipment must be furnished by your group or organization.

Expected Attendance: _____
(Main Library/Jacksonville max capacity = 75; Sneads Ferry max capacity = 25 classroom (with table & chairs) & 40 seating only; Swansboro max capacity = 35)

Will refreshments be served? Yes _____ No _____ (If yes, your group is responsible for cleanup)

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