

Midlothian Public Library
Meeting Room Art Exhibit Reservation Request

Name _____

Address _____

Phone _____ Email: _____

Organization Represented (if applicable) _____

Title of Exhibit (if any) _____

Briefly describe the nature of the exhibit*

Month you prefer to reserve meeting room display: _____
(Booked by calendar month only)

I have reviewed, understand, and agree to abide by the Policy and Guidelines Regarding the Use by the Public of Library Display & Exhibit Space, which governs the reservation and use of Library display cases and other areas. I agree to assume responsibility for the display and to insure that it is mounted and removed on time and that its contents and design are consistent with the requirements and guidelines set forth in the above-mentioned policy.

Signature of Applicant _____ Date _____

For Library Use:

Application received by: _____ Date _____
Work samples reviewed by: _____ Date _____
Application approved by** _____ Date _____

***Approval must be by the Art Coordinator, Adult Services Manager, or the Library Director.*