

APPLICATION FOR MAHOPAC PUBLIC LIBRARY AUDIO/VISUAL EQUIPMENT USE

Please attach this document to your room application if equipment is to be used in the library.

Name/Organization : _____

Please check item(s) you wish to use:

- ____ Large TV w/ DVD/VCR (*in-library use only*)
- ____ TV w/ VCR (*in-library use only*)
- ____ Large LED projector for use w/ laptop or DVD (*in-library use only*)
- ____ Small LED projector for use w/ laptop or DVD
- ____ Laptop computer
- ____ DVD player
- ____ 16mm projector
- ____ Slide projector w/ carousel
- ____ Portable PA system
- ____ Portable video presenter
- ____ Filmstrip projector
- ____ Audiocassette player
- ____ Portable record player
- ____ Portable table-top projector screen (3' x 5')

Date(s) and time(s) you wish to use the equipment:

Event Date(s): _____ | _____ Day(s) of the Week: _____

Time(s) of Day: from _____ am/pm to _____ am/pm | from _____ am/pm to _____ am/pm

If equipment is to be used in library, please indicate location:

- | Third Floor | Second Floor | First Floor |
|-----------------------------------|----------------------------------|-----------------------|
| * ____ Local History [20]** | ____ Tutor 1 (<i>west</i>) [6] | ____ Café Area [15] |
| * ____ Conference (Board Rm) [20] | ____ Tutor 2 (<i>east</i>) [8] | ____ Lake View [25] |
| * ____ Community [200] | ____ Land Use Center [25] | ____ Garden View [25] |
| * ____ Computer Lab [30]** | ____ Periodicals [25] | |

* Available after normal library hours for a fee.

** Restricted to staff-supervised or Historical Society meetings.

I have read and agree to abide by the Mahopac Public Library Policy on the use of equipment. I shall be responsible for any late-return fees, loss, or damage to library equipment in my care.

Name: (*print*) _____

Signature: _____ Date: _____

(Signature implies an understanding of, and agreement to, abide by the MPL equipment-use policy.)

Contact name (if different from above): _____

Phone: _____ cell#: _____

Fax: _____ e-mail: _____

For Mahopac Public Library office use only:

MPL Approval: _____ Date: _____

Fee paid: _____ check#: _____ date: _____ amount: \$ _____