

321. APPLICATION TO USE THE LIBRARY'S DISPLAY SPACES

Are you applying on behalf of *(Please check one.)*

- a non-profit or community-based organization
- a business or business organization
- an individual or individuals

Name of the Applicant: _____

Address: _____

City, State & Zip: _____

Applicant's Telephone: _____

Applicant's Email Address: _____

Name of the Contact Person for the Business or Organization: _____

Contact's Telephone: _____

Contact's Email Address: _____

When would you like to use the display case or spaces? *(Please specify a month and year.)*

(First Choice) Month : _____ Year: _____

(Second Choice) Month : _____ Year: _____

Are you a Seekonk resident or does your organization serve people in Seekonk?

- Yes
- No

Have you used the library display case or spaces in the past two years?

- Yes
- No

Have you received, read and understood the Library's Policy on use of the display case and spaces?

- Yes
- No

Please briefly describe what you wish to put on display and your purpose for doing so. Please feel free to attach photographs, printed materials or list your website. Please also note any awards or prizes that you or your organization may have received.

Signature of Applicant or Representative

Date

The application was received on _____ by _____.

Approved by the Director _____ on _____

Signature

Date