



# Single Event Meeting Space Application

City of San Leandro  
Library Services Department  
300 Estudillo Ave.  
(510) 577-3942  
(510) 577-3967 FAX

### Contact Information

Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street City Zip Code

Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

### Meeting Information

Type of Activity: \_\_\_\_\_

Day & Date: \_\_\_\_\_ Estimated Attendance: \_\_\_\_\_

Time needed (set-up thru clean-up): \_\_\_\_\_ am pm to \_\_\_\_\_ am pm Event starts at: \_\_\_\_\_ am pm

### Facility Information

\_\_\_\_ Mary Brown Room      \_\_\_\_ Conference Room B      \_\_\_\_ Estudillo Room  
\_\_\_\_ Trustees Room      \_\_\_\_ Conference Room C      \_\_\_\_ Dave Karp Senior Facility  
\_\_\_\_ Lecture Hall      \_\_\_\_ Manor Branch Program      \_\_\_\_ Kitchen

**Room Arrangement** (check one)      Number of Chairs: \_\_\_\_\_      Number of Tables: \_\_\_\_\_

\_\_\_\_ Auditorium Style (rows of chairs)      \_\_\_\_ Banquet Style      \_\_\_\_ Food or Beverage Table  
\_\_\_\_ Conference Table Style      \_\_\_\_ Classroom Desk Style      \_\_\_\_ Registration Table

### Equipment – Equipment rental prices listed in the Facility Usage Fees and Guidelines

\_\_\_\_ Projector, Movie      \_\_\_\_ Mic, Hand held      \_\_\_\_ Flip Chart w/o paper      \_\_\_\_ TV/VCR  
\_\_\_\_ Projector, Overhead      \_\_\_\_ Mic, Standing      \_\_\_\_ Flip Chart with paper & pens      \_\_\_\_ TV/DVD  
\_\_\_\_ Projector, Slide      \_\_\_\_ Mic, Table Top      \_\_\_\_ Wooden easel      \_\_\_\_ Screen  
\_\_\_\_ Projector, Power Point      \_\_\_\_ Mic, Podium      \_\_\_\_ Dry Erase Board with pens  
\_\_\_\_ Conference Phone      \_\_\_\_ Mic, Lapel      \_\_\_\_ Portable podium

### **Reservation Agreement:**

If Application is granted, I agree to comply strictly with the facility guidelines, to supervise care in use of all facilities and equipment, and make good any damage or loss of property arising from our occupancy of any portion of the building.

**ALL PARKING LOT RESTRICTIONS APPLY TO MEETING ROOM USERS – TWO HOUR LIMIT.**

Please Note: All applications are tentative until permit is issued.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

### **For Library Use Only**

Facility Fee \_\_\_\_\_  
Security Fee \_\_\_\_\_  
Insurance \_\_\_\_\_  
Equipment Rental \_\_\_\_\_  
Damage Deposit \_\_\_\_\_  
Maintenance \_\_\_\_\_  
**Total Due:**      \$ \_\_\_\_\_

**User Eligibility:**  
Group A \_\_\_\_\_      Group E \_\_\_\_\_  
Group B \_\_\_\_\_      Group F \_\_\_\_\_  
Group C \_\_\_\_\_      Group G \_\_\_\_\_  
Group D \_\_\_\_\_

**Room Assignment:** \_\_\_\_\_

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_