APPLICATION FOR USE OF LIBRARY FACILITIES
Yonkers Public Library – Grinton I. Will Branch
1500 Central Park Avenue
Yonkers, NY, 10710
(914) 337-1500 ext. 304            (914) 793-0130 (fax)

Name of Organization: ______________________________ Date of Application: __________
Address: __________________________________________________________
Contact Person: ___________________ Person in Charge: ___________________
Phone #: (work) ___________________ (cell) ___________________ (fax) ___________
Organization is ( ) For Profit ( ) Not For Profit ( ) Governmental
Title of Event: ______________________________
Purpose of Event: ________________________
Date of Event (list all dates if recurring): __________________________________________
What time will the event begin: _______ What time will the event end: _______
What time will you arrive to set-up: _______ What time will you be leaving: _______
Will there be food? ( ) Yes ( ) No If yes, what time will the food be delivered? _______
Is this event open to the public? ( ) Yes ( ) No If yes, is registration required? ( ) Yes ( ) No
If so, how is registration completed? _______ Is there an admission charge? ( ) Yes ( ) No
Number of People Anticipated to Attend: _______

FACILITIES REQUESTED (please see reverse for additional information on fees)
( ) Auditorium (seats 325)
( ) Projection Room (seats 36)
( ) Story Room (seats 35)
( ) Senator Flynn Room (seats 45)

EQUIPMENT REQUESTED
( ) Podium ( ) TV/VCR
( ) Podium w/ Microphone ( ) DVD
( ) Microphones, Hand-Held (# ___) ( ) Whiteboard
( ) Microphone, Portable ( ) Easel (# ___)
( ) Overhead Projector ( ) Tables (# ___; 6 ft. or 8 ft.)
( ) LCD Projector ( ) Chairs (# ___)
( ) Screen ( ) Coffee Urn (coffee is not provided)

ROOM SET-UP (be specific): __________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

I hereby state that I am empowered to act for the organization listed above and I agree to faithfully abide by all Library regulations as outlined in the Policy on the Use of Library Facilities.

_____________________________ ___________________________ rev. 6-19
Signature of Applicant Title
**SCHEDULE OF FEES AT THE GRINTON I. WILL BRANCH**

<table>
<thead>
<tr>
<th>GRINTON I. WILL BRANCH</th>
<th>Morning or Afternoon</th>
<th>Morning and Afternoon</th>
<th>Evening*</th>
<th>Weekends</th>
</tr>
</thead>
<tbody>
<tr>
<td>Auditorium (325 seats)</td>
<td>$100</td>
<td>$150</td>
<td>$250</td>
<td>$250</td>
</tr>
<tr>
<td>Projection Rm. (36 seats)</td>
<td>$35</td>
<td>$35</td>
<td>$35</td>
<td>$35</td>
</tr>
<tr>
<td>Story Room (35 seats)</td>
<td>$35</td>
<td>$35</td>
<td>$35</td>
<td>$35</td>
</tr>
<tr>
<td>Sen.Flynn Room (45 seats)</td>
<td>N/A</td>
<td>N/A</td>
<td>$50</td>
<td>$50</td>
</tr>
</tbody>
</table>

*If the Will Branch must be open after regular hours, an overtime fee of $60 per hour will be charged. Overtime must be booked at the time that the meeting is scheduled, and all fees must be paid at the Branch Administrator’s Office. Please note: A custodial set-up fee may be charged on an hourly fee basis according to program needs.

When performances or meetings are scheduled for an afternoon and evening of the same day by one group, the afternoon **plus** evening fee will be charged.

**REHEARSAL** time will be scheduled at the convenience of the Library, and the following fees will apply:

- Morning (9-1) - $25
- Afternoon (1-6) - $25
- Evening (6-9) - $37.50

Rehearsals lasting beyond above time periods will be billed at the full day or evening rates. Proper application must be made and approval obtained for all rehearsal time.

**At the discretion of the Branch Administrator, a custodial fee may be imposed on both for-profit and not-for-profit groups depending upon service demands.**

**Total Fees Due:** $ _______

Please make checks payable to **The Yonkers Public Library**