## PALOS VERDES LIBRARY DISTRICT

## APPLICATION FOR USE OF THE MALAGA COVE LIBRARY - TOWER ROOM

2400 Via Campesina, Palos Verdes Estates, CA 90274 (310) 377-9584 x247

Outside				Data of Applications		
			Date of Application:			
Purpose of Meeting		Expected Attendance:				
Day of Week	Date of E	vent		Time	to	
Contact Person		Email	Total # of hours:			
Address			_City, State,	Zip		
Business Telephone: (	)		Home: (	)		
Cancellations made at required for use of faci	least two weeks prior t lity after hours.	o event will be ref	unded, les	e. Fees are payable at t is a \$10 administrative f o/hr.; □ facility closed	ee. Four-week notice	
				/hr.; □ facility closed		
				/hr.; □ facility closed		
☐ For-profit users, close	ed-to-the-public, or ch	arge to attend, fac	ility open-	\$60/hr.; 🗆 facility c	losed\$90/h	
Check all that apply (u	se of the following at	no charge):				
☐ Easel ☐ White	Board with Marker	☐ Flip Chart	☐ Othe	er		
PAYMENTS ACCEPTED	IN CASH, CHECK OR C	REDIT CARDS.	т	OTAL CHARGES \$		
information given is correct assume all responsibility for	A COPY OF YOU kes application to the Palos The undersigned further s any infraction of the rules a	R SIGNED APPLICAT  Verdes Library District tates that they have thand regulations as state	ION WILL B for the use te authority t ed in the PAL	G ROOM CHECKLIST.  BE GIVEN TO YOU.  of the Tower Room premises to make this application and LOS VERDES LIBRARY DISTRICT and	agrees that the applicant w T MEETING ROOM POLICY.	
Signature of Responsible	Party	Date	Print Na	ame and Daytime Phone N	Number	
Return signed copy to:	to: Administration Office Palos Verdes Library District 701 Silver Spur Road, Rolling Hills Estates, C. (310) 377-9584 Ext 247/Fax: (310) 541-6807		90274	For Office Use Only: (initial all that apply)    paid   confirmed   no charge   approved by Director   approved by Facilities		