

Public Meeting Room Application



CITY OF POULSBO

200 NE Moe Street
 Poulsbo, WA 98370
 Phone: 360.779.3901
 Fax: 360.779.5112
 www.cityofpoulsbo.com

Today's Date: _____

Name of Group or Organization: _____

Address: _____

City: _____ State: _____

Zip/Postal Code: _____ Non Profit ID No. (if applicable) _____

Contact Name: _____

E-mail Address

Bus/Home Phone _____

Cell Phone: _____

Date Requested: _____

Time Requested: to
Include Set-up and Clean-up

Reoccurring Request ? Yes No

Weekly Monthly

Mon 1st

Tues 2nd

Wed 3rd

Thurs 4th

Fri Last

Sat

Sun

Room Request:

Anticipated No. in Attendance: _____

Will Food be Served? Yes No

Audio/Video Needs? Yes No

A/V Fee \$10 per hour (A/V training required)

Use this space to add any additional information necessary to describe your meeting or event you feel will assist the City in determining space needs and/or eligibility of use.

I have read and understand the City of Poulsbo's Room Use Policies. I further understand:

- * I am responsible for any damage incurred. A damage fee may be charged for actual replacement or repair fees .*
- * A cleaning fee may be billed at the rate of \$30 per hour, if meeting space is not left in order.*

Authorized Signature _____

For City Use Only

Application Status	Date Received	Amount	Receipt #/Employee Initials
Rental Fee (Rev. Code 16)			
A/V Fee (Rev. Code 16)			