

**Manchester City Library**  
405 Pine Street, Manchester NH 03104 (603)-624-6550 – Fax: (603)-624-6559  
76 N. Main Street, Manchester NH 03102 – (603)-624-6560 – Fax (603)624-6216  
**Meeting Room Application**

**Requests for meeting rooms must be:**

1. Submitted in writing using the application below or booked online
2. Accompanied by applicable fees and deposits
3. Received by the Manchester City Library

**The meeting room will be reserved for your organization *when you receive a phone call or are confirmed online from the Manchester City Library.***

Name of Group or Organization \_\_\_\_\_

Description of program \_\_\_\_\_

Non-profit status? \_\_\_\_\_ Non-profit number \_\_\_\_\_

**All Meetings must be open to the public.**

Contact Name \_\_\_\_\_ Contact Phone \_\_\_\_\_

Contact Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Contact Address (if different from  
organization's) \_\_\_\_\_

EVENT DATE / TIME    Event Start \_\_\_\_\_ Event End \_\_\_\_\_

TOTAL ROOM TIME    Setup Start \_\_\_\_\_ Clean-up End \_\_\_\_\_

WHICH ROOM WOULD YOU LIKE?: \_\_\_\_\_

**HUNT ROOM** – HOLDS UP TO 15 PEOPLE - FEE \$150.00

**WINCHELL ROOM** – HOLDS UP TO 50 PEOPLE - FEE \$250.00 – FOOD AND DRINK  
MAY BE SERVED – USAGE FEE FOR KITCHEN - \$10.00

**AUDITORIUM** – HOLDS UP TO 175 PEOPLE – FEE IS \$400.00 – USAGE FEE FOR PIANO  
IS \$90.00

**WEST ROOMS** - \$50.00

Organization Address \_\_\_\_\_

Organization/Event Website \_\_\_\_\_

Expected attendance \_\_\_\_\_

Room set-up \_\_\_\_\_

Check Equipment needed:

Chairs \_\_\_\_\_ Tables \_\_\_\_\_ Projector (Auditorium Only ) \_\_\_\_\_ Overhead \_\_\_\_\_

Screen \_\_\_\_\_ Microphone \_\_\_\_\_ Piano \_\_\_\_\_ Small Table \_\_\_\_\_ Portable VCR \_\_\_\_\_

Easel\_\_\_\_\_ (Paper for the easel is not provided. Please bring some. Thank you.)

If showing film, do you have Performance Rights? – Please note the library’s licenses do not cover outside groups. Yes/No (Please circle one)

**I have read and fully understand the policies, rules and disclaimers pertaining to the use of the Manchester City Library meeting rooms. I agree to be responsible for complying with them and making payments as called for herein.**

**SIGNATURE:**\_\_\_\_\_ **Date**\_\_\_\_\_

Library usage: Application Received\_\_\_\_\_ Approved\_\_\_\_\_ Fees Paid\_\_\_\_\_

Date of payment received\_\_\_\_\_

**FAILURE TO COMPLETE FORM AND PAY ALL FEES ONE WEEK IN ADVANCE FORFEITS  
BOOKING OF THE LIBRARY ROOMS.**