



ROSEBURG PUBLIC LIBRARY

1409 NE Diamond Lake Blvd., Suite 100 | Roseburg, OR 97470

Reservation Date: _____

Time of room use: _____ to _____
Must fall within days and hours of availability.

Ford Room:

Multipurpose Room #1:

Multipurpose Room #2:

User name and contact information:

Name: _____ Phone: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

I have read the Meeting Room Policy, which is incorporated herein by reference and agree to abide by it.

Responsible Person:

Signature (signed or digital)

Date