



MEETING ROOM APPEAL FORM

In the case of a room reservation denial, an appeal may be made to the Library Board of Trustees. Please complete the following form and submit to the Library Director. This appeal form will be reviewed at the next regularly scheduled Library Board Meeting.

Name: _____

Address: _____

Phone: _____ **Email:** _____

Represents: Self ___ **Organization** ___ *(If person making the inquiry represents Organization)*

Name of Organization: _____

Address of Organization: _____

Person in Charge: _____

Date of Application: _____

Reason for Denial: _____

Please share responses to the following questions to help us understand your objection(s).

1. What section of the Meeting Room Reservation Policy were referenced in the denial for your Meeting Room Request from the Library?

2. What are your objections to the room reservation denial?

Signature: _____ **Date:** _____