



Hopkinton Town Library: Room Reservation Form

Today's Date: _____ (this form must be updated annually)

Name of Group: _____

Contact Person: (must be a Hopkinton resident) _____

Address: _____

Phone: _____ Email Address: _____

Room Requested: Bates Community Room _____

Local History Room _____ (Room Use must start when library is open)

Purpose of Meeting and numbers expected: _____

Requested Dates (with times including time needed for set up and clean up):

I have read the Hopkinton Town Library's Meeting Room Policy and understand the conditions under which it may be used and that failure to comply will result in cancellation of or refusal of future reservations.

Signature of Responsible Person and
Date: _____

Library Director's Signature and
Date: _____