

**Ivan O. Davis-Liberty Library  
Request for Use of Library**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email \_\_\_\_\_

Organization You Represent : \_\_\_\_\_

Is Organization a Non-Profit? \_\_\_\_\_

Event \_\_\_\_\_

Date and Time of Event: \_\_\_\_\_

Alternative Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approval Signature: \_\_\_\_\_