

**Fauquier County Public Library
Bealeton Depot Reservation Form**

Date of use	Time of use (include setup and clean up time)	Number Attending _____ Maximum capacity: Varies w/use, please consult library staff.
Purpose of meeting		
Organization		
Representative's Name		
Address		
Phone		
Email Address		
Alternate Representative		
Alternate phone		

Type of Group: **check one**

Payment received

<input type="checkbox"/> Fauquier County Government	No charge	
<input type="checkbox"/> Other Government agency	\$35.00	
<input type="checkbox"/> Business or Individual	\$75.00	
<input type="checkbox"/> Non-profit organization - 501c(3) number _____	\$35.00	
<input type="checkbox"/> Damage deposit (if food/drink served)	\$75.00	

Please make check payable to "Fauquier County Public Library".

Application and check may be mailed to: Bealeton branch library, 10877 Willow Drive North, Bealeton, VA 22712

Questions? Please call 540-422-8532

I have received and read a copy of the policy and guidelines governing the use of the Bealeton Depot and agree to abide by same. **A reservation is not confirmed until staff has approved availability and received payment and a signed reservation form.** As a sponsor of the above group, I will be responsible for leaving the facility in as found condition, for fulfilling all other requirements listed in the policy, and for promptly returning the key.

Signature: _____

Key Claim

Key Barcode	Issued by	Date
Representative's name (please print)		
Representative's Signature		

Key Return

Return Date	Received by
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