

JACKSON-GEORGE REGIONAL LIBRARY SYSTEM

Application to Exhibit
Complete and Return to the Library

Library _____ Today's Date _____

Applicant's Name _____

Organization, if applicable _____

Address _____
Street City/State Zip Code

Phone: Day _____ Evening _____

Email _____

Brief Description of Exhibit: (type of exhibit, number of items, space needs, targeted audience, etc.) *(Use back of this form if additional space is needed)*

Requested dates to exhibit: _____ to _____
Beginning month/day/year Ending month/day/year

I have read and understand the "Policies Governing Exhibits" and understand that, if approved, I am responsible for installing and removing my exhibit on the dates approved by the Library Manager and that the Library is not responsible for loss, theft, damage or injury to the items I place on exhibit.

SIGNED: _____ DATE: _____

Action by Library Staff

Library employee receiving application: _____ Date: _____

Exhibit/display area assigned for use: _____

Approved on: _____ Not approved on: _____

_____ Dates listed by applicant accepted, or

_____ Requested exhibit dates changed from: _____ to: _____
Mo/Day/Year Mo/Day/Year

_____ Date: _____

Library Manager's Signature

(If application to exhibit is not approved, Library Manager will notify the applicant by mail, detailing reason(s) for this action).