



The Ron Steinberg Reading & Meeting Room Reservation Form

Please print neatly and return to Elting Library 4 weeks in advance of your event.

Reservations must be secured with a credit card.

Fax: (845) 255-5818

Email: eltinglibrary@yahoo.com

Organization Name _____ Representative's Name _____

Phone: _____ Fax: _____ Email Address: _____

Reservation Information

The Ron Steinberg Reading & Meeting Room may only be used when the Library is closed. Gatherings may not begin before 8:00 AM or continue past 11:00 PM.

Day: Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Reservation Date: _____ Expected Number of Attendees: _____

Event Start Time: _____ End Time: _____

Please check which of the following your group will require: Screen Access to the Kitchen

Deposit Information

A credit card will be taken to assure neat & clean return of the Room. All damage or excess cleaning costs will be charged to the group. Deposits must be secured at least 24 hours before reservation time.

Credit Card Information Master Card Visa

_____-_____-_____-_____-_____-_____-_____-_____-_____-_____- Expiration Date: __ / __

Card Holder's Name as it Appears on the Card: _____

Yes! Our group would like to make a donation to the Library to help defray the cost associated with running *The Ron Steinberg Reading & Meeting Room*.

Please: Charge my credit card \$ _____ Accept the enclosed cash/check in the amount of \$ _____

By signing below, you accept all responsibility for the use, protection, and clean return of the facilities.

Sign Here _____ Date: _____