

MIDLOTHIAN PUBLIC LIBRARY
EXHIBIT REQUEST FORM

Name _____

Address _____

Phone _____ Email _____

Organization Represented (if applicable) _____

Title of Exhibit (if any) _____

Briefly describe the nature of the exhibit:

Month you prefer to display: _____ (Booked by calendar month only)

I have reviewed, understand, and agree to abide by the library's Exhibit, Notice & Sign Policy, which governs the reservation and use of Library display areas. I agree to assume responsibility for the display and to insure that it is mounted and removed on time and that its contents and design are consistent with the requirements and guidelines set forth in the above-mentioned policy.

Signature of Applicant _____ Date _____

For Library Use:

Application received by: _____ Date _____

Application approved by: _____ Date _____

Approval must be by the Adult Services Librarian, a Manager, or the Library Director.

Revised 01/2024