

APPLICATION TO EXHIBIT AT MARION COUNTY LIBRARY

Name of Entity _____

Contact Information:

Name _____

Physical and Mailing Address _____

Contact Telephone _____

Email _____

Website _____

Describe the subject of your exhibit _____

List the items to be exhibited:

Normally exhibits will be limited to one month.

List the month/day you are requesting to start and end the exhibit:

1st choice: _____

2nd choice: _____

I have read and agree to the terms of the library's Exhibits and Bulletin Board Policy.

Authorized Signature

Date

APPROVED:

Library Director

Date