## Blackstone Public Library Exhibit Space Reservation Form

name of individual/Organization	
Start date of Exhibit	End date of Exhibit
Contact Name	
Mailing Address	
Telephone	
Email	
My exhibit will be:	
In the meeting room	Number of art-work hangers desired
In the display case(s)	Number of cases desired
•	o be listed on our website calendar, please Please remember this will be on the website
Contact name	
Contact phone	
Contact email	
Website address	
This exhibit is open to the public	yes/no (please circle)
I have read and agree to comply with the exhibit policy of the Blackstone Public Library and have been provided with a copy.	
Signature of Applicant	Date
Request approved by Director	: yes/no
Signature of Director	Date