

HANSON PUBLIC LIBRARY
DISPLAY CASE APPLICATION

Date: _____

Name: _____

Group/Organization (if applicable): _____

Address: _____

Town: _____ State: _____ Zip Code: _____

Phone Number: _____

Email: _____

Preferred display month: _____

Description of display:

I have read and agree to the Hanson Public Library Display Case Policy.

Signature: _____

FOR STAFF USE ONLY:

Staff initials: _____

Date Processed: _____

Approved Not Approved

Date Applicant Notified: _____