Revised: 4/17/2023

## **Display Case Application**Canal Fulton Public Library

Date of Application:		
Name/Company/Organization:		_
Nature of Display and/or What kinds of items will you be	e displaying?	_
How does this display meet the cultural, educational, or l	nistorical needs of the community?	_
Month (and/or dates you would like to use the Library D	isplay Case):	_
I/We understand that the Canal Fulton Public Library is exhibit areas. Insurance is my/our sole responsibility and Library from any responsibility for loss or damage to ma	d not responsibility of the Library. I/V	
Signature	Contact Telephone Number	
Guardian signature if a minor	Contact Telephone Number	_
For Office Use Only:		
Application AcceptedDate		irector's ignature