



Clark County Public Library

Bookmobile Special Event Request Form

Please Print Clearly

Name of organization/event: _____ Date: _____

Address (please include ZIP): _____

Contact person: _____

Phone Number: () _____ - _____ Email: _____

Please describe the area where the Bookmobile would be parked and how it could enter and exit:

Requested date and length of time for special event: _____

Topic or purpose of the event: _____

Would you be promoting that the Bookmobile would be available? Yes _____ No _____

If so, how? _____

Estimated number of individuals served at this event: _____

What age levels do you anticipate the Bookmobile serving at this event? (Check all that apply)

Preschool _____ Children _____ Teens _____ Adults _____ Seniors _____ Families _____

What library services would most benefit this event? (materials checkout, library card sign-up, promotion of library services, etc...)

Comments or Questions:

This form may be returned to any CCPL location ATTN: John Pelletier or mailed to:

Bookmobile Department, 201 S. Fountain Avenue, Springfield, Ohio 45506