

**WEST BABYLON PUBLIC  
LIBRARY**

**211 Route 109**

**West Babylon, NY 11704**

**TODAY'S DATE:** \_\_\_\_\_

**REQUEST TO EXHIBIT OR DISPLAY ITEMS**

**Non-Profit: YES ☐ NO ☐**

**Name :** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Indicate general nature of Exhibit or Display:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*PLEASE ATTACH LIST OF ITEMS TO BE DISPLAYED AND PHOTOGRAPHS OF ALL ITEMS.**

**I have read the Exhibit and Display procedure and agree to abide by all provisions.**

\_\_\_\_\_  
**Applicant's Signature**

**LIBRARY USE ONLY**

☐ **APPLICATION APPROVED**

☐ **APPLICATION NOT APPROVED**

**DATES OF DISPLAY** \_\_\_\_\_

**LOCATION OF DISPLAY** \_\_\_\_\_

\_\_\_\_\_  
**LIBRARY STAFF SIGNATURE**