



Maker Space Scheduling Request

Name: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

I want to schedule time with:

- 3D Printer
- Memory Lab
- Other _____

Time slot:

- Tuesday 9am-12:30pm DATE: _____
- Thursday 12:30pm-4pm DATE: _____
- Saturday 9am-12:30pm (limited dates available) DATE: _____
- Other DATE: _____

I understand that time slots are scheduled on a first come first served basis and assigned according to staff availability. I understand and will abide by library policies. I also agree that I will be held liable for any damage I might cause to the library's equipment.

SIGNED: _____

You will be contacted within 2 business days to confirm time and date and to discuss your project details.