

Southern Lehigh Public Library
3200 Preston Lane, Center Valley PA 18034
610-282-8825 Fax 610-282-8828
www.solehipl.org

DISPLAY CASE APPLICATION FORM

Name: _____

(Full name of Organization and contact person, if applicable)

Address: _____

Phone: _____

Email: _____

Type of Exhibit: (describe briefly)

Month Preference: _____ (The Library does not guarantee this preference can be accommodated.)

My signature below indicates that I have read and agree to comply with the library's Display Case Policy. I understand that the Southern Lehigh Public Library cannot be held responsible for any damage or theft that may occur during the period of time the exhibit is on display.

Signature:

Date:

STAFF USE ONLY

Approved - Display Date: _____

Display Case Release Form Received : _____

Signature of Library Staff: _____

Date: _____