

APPLICATION FORM – MEETING HOUSE USE

1. Name of Organization _____
2. Name of Contact Person: _____
3. Mailing Address of Contact Person: _____
(street) (town)
4. Locatable Address of Contact Person: _____
(street) (town)
5. Tel: (home) _____ (work) _____
Email Address _____
6. Date(s) requested for use of building: _____
7. Time requested for use: _____ Time into building: _____
Time vacating building: _____
Rehearsal Date & Time: _____
8. Building to be used for: _____
9. #Attending event: _____

I (contact person) have received a copy of the Rockingham Meeting House Use Policy and General Rules and agree to abide by the Policy and Rules. Further, that the use will conform to the Policy and Rules, and the use as described above. As the contact person, I agree to be responsible for all breakage and damage which may occur as the result of this use.

(Signature of Contact Person)

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Following to be completed by town office:

Fees: Rental Fee: Resident \$150 _____ Non-Resident \$250 _____

Amount Paid: _____ Date of payment: _____

Fee exemption: _____. Reason for exemption. _____

Use approved: _____ **Date:** _____
(Signature of Municipal Manager or designee)

Original - retain for Town office records

cc: Historic Preservation Commission Coordinator