

HARWICH COMMUNITY CENTER FACILITY APPLICATION

Fax: 508-430-7085

100 Oak Street, Harwich, MA 02645

Tel: 508-430-7568

1. Space Requested: (Please annotate if you are requesting a specific room, substitute will be made if unavailable)

Activity Room(s): _____ or;

Multi-Purpose Room: _____

2. Day(s) & Date(s) of Week:

M T W T F S

Circle each as they apply

Each Date Requested - One page for each MONTH

3. Time of Event: From _____ : _____ AM/PM To _____ : _____ AM/PM

4. Organization Requesting: _____ Community Served: _____

(town)

5. Point of Contact Name: _____ Phone Number _____
Address: _____

Email Address: _____

6. Purpose of Use: _____

7. personnel attending

(number)

8. Is there an admission fee: Yes / No if so, price: _____ per Adult, _____ Child

(Circle one)

9. Does this organization carry liability insurance? Yes No (Circle one) If yes, indicate amount: _____

Insurance Agent's Name: _____ Please provide certificate of insurance.

10. Application is for the town of Harwich? Yes No (Circle one)

11. Fees:

Estimate

Amount Billed

Custodial

Rental Fees

Kitchen Fees

12. Agreement: I (we) have read the rules and regulations and fully understand their contents. I (we) accept the responsibility for proper use of the facilities and for the actions and conduct of the above group using Community Center facilities for this function/these functions. I (we) agree to provide adequate adult supervision at all times during the use of the facility. I (we) will assume all responsibility for all fees charges and damage claims resulting from such use of the facilities. I (we) understand any advertising for this event outside the building MUST FOLLOW THE SIGN CODE FOR THE TOWN OF HARWICH. These codes may be obtained from the Harwich Building Commission.

Signature: _____ Phone # _____

Address: _____

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_____ This Application is approved. Reservations made according to above information.

_____ This application is approved with the following conditions: _____

_____ This application has been denied, due to: _____