



APPLICATION - USE OF TOWN FACILITIES MEETING ROOMS

Name of Organization: _____

Mailing Address: _____

Authorized Representative: _____

Telephone #: _____ Email: _____

Date (s) of Meeting/Event: _____

Time needed (please include time needed for set-up and clean-up):

Begin: _____ End: _____

Anticipated # of Attendees: (NTE capacity set by Fire Dept.) _____

Building and Room Number or Name Requested: _____

Kitchenette Needed? Yes: _____ No: _____

Audio/Visual Equipment Needed: Yes: _____ No: _____

Brief description of meeting/program: _____

You are responsible for arranging the room to suit your needs (i.e. moving tables and chairs) and returning the room as you found it. If refreshments are served, the kitchen area and tables must be cleaned after use and garbage and trash must be properly disposed of. If there is clean-up required after the event, a fee for custodial services may be charged to the group by the Town Administrator, at the rate of 1.5 times the hourly wage for those employed to correct the problem. The Town of Southampton is not responsible for the loss of any belongings, or any injuries sustained during meetings/events.

By signing this application, I attest that I am an authorized representative of the group or organization requesting the use of one of the Town facilities meeting rooms. I have read the rules and conditions relating to such use and fully understand and agree on behalf of the group or organization to abide by these rules and conditions.

Name and Signature of authorized representative:

Date: _____

Approved: _____

Date: _____

Town Administrator