



Town of Ossipee, New Hampshire
Selectmen's Office
PO Box 67, 55 Main Street
Center Ossipee, NH 03814
Phone: 603-539-4181
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tossipee@myfairpoint.net

CONTRACT FOR USE OF FACILITIES

___ Copy to Selectmen ___ Copy to Recreation Dept. ___ Copy to Applicant

Name of Group /Organization: _____

Group/Organization Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Profit: ___ Non-Profit: ___ Federal Tax Exempt / 501 c3 Number: _____

Contact Person Name: _____ Phone: _____

Nature of Activity: _____

Dates of Activity: _____ Times of Activity: _____

Town Facility(ies) requested for use: _____

Town Equipment to be used: _____

Police on Duty: ___ YES ___ NO Insurance: ___ YES ___ NO (attach certificate if required)

\$50.00 Deposit	___ YES ___ NO	\$ _____
\$10.00 Key Deposit	___ YES ___ NO	\$ _____
Custodian	___ YES ___ NO	\$ _____
Kitchen	___ YES ___ NO	\$ _____
Other _____	___ YES ___ NO	\$ _____
TOTAL FEE CHARGED		\$ _____

Cost of Police coverage: Will be established and billed separately by Ossipee Police Department directly to responsible party.

All fees and deposit must be paid in full, by all groups, in advance of the event. Checks payable to: TOWN OF OSSIPEE.

It is mutually agreed the group/organization is responsible for any clean up of the facility, unusual expenses, replacement of equipment, and/or any damage caused by the above named group/organization. ALL your own supplies must be provided. Town Hall kitchen items are NOT for use by any group.

Anyone who uses the Town Hall facilities must remove ALL their own trash. If the trash is not removed, it will result in loss of deposit for use of this facility.

I have read, understand and agree to abide by the terms listed above, including the attached "Regulations for Use".

Signature: _____ Date: _____

APPROVAL

Signature of Individual(s) authorized to approve use of Town Facility(ies) for above named:

_____ Date: _____