



Town of Allenstown

Town Administrator

16 School Street

Allenstown, NH 03275

603-485-4276 ext. 112

TOWN BUILDING RENTAL APPLICATION

User Name: _____ Phone # _____

User Address: _____

Contact Person (Name): _____

Contact Person Address: _____ Phone # _____

Date/Time: _____

Location: _____

Description of Function: _____

Number of individuals at function: _____

Insurance Company: _____ Phone # _____

Certificate of Insurance of file: ☐ Y ☐ N

I _____ have the power and authority to enter into this agreement with the Town of Allenstown and I have received and read and fully understand the terms and agreement of the Town's Facilities use policy.

This form must be received and approved by the Board of Selectmen prior to anyone occupying the building.

Approved: _____

Fee Paid: _____

Selectman

Selectman

Selectman