



## Application for Use of Boxborough Town Hall

Contact: Town Administrator Departmental Assistant (978) 264-1714

Please Print Clearly

(fillable form)

**Name of Organization:** \_\_\_\_\_

**Street Address/City/State/ZIP:** \_\_\_\_\_

**Name(s) of Applicant(s) Accepting Responsibility for use of the Facility:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Room(s) Requested:** \_\_\_\_\_

**Requested day, date, and time:** \_\_\_\_\_

**Number of Attendees** \_\_\_\_\_ **Will Admission be charged?** \_\_\_\_\_

**Are there any Boxborough Residents in Your Organization and if so, what percentage of your organization are residents?** \_\_\_\_\_

**What Custodial Care (if any) is needed (including special room setup)?** \_\_\_\_\_

By signing this application, the applicant agrees to follow the Town Hall Use Policy, including the Building Check List, and all regulations for Town Hall Use, and, to the extent permitted by law, the applicant shall hold harmless, defend and indemnify the town of Boxborough, a municipal corporation of the commonwealth of Massachusetts, and the town's employees, officials, volunteers, agents and board members, from any and all losses, claims, lawsuits and expenses, including but not limited to costs associated with accidents, personal injuries or damage to personal property sustained by a third party, due to the negligence of the applicant while using the Boxborough Town Hall.

**Applicant signature:** \_\_\_\_\_

**For Official Use Only:**

Permission is hereby granted to: \_\_\_\_\_

for use of Town Hall as requested, subject to the following conditions:

\_\_\_\_\_

**Fee:** \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Comments: \_\_\_\_\_

Town Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Boxborough Select Board approved 09\_23\_2019 replaces 5/12/2004

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