

*Town of Lincoln
Main Street
Lincoln, NH 03251*

*Application for Use of Town Hall Meeting Room
(For Previous Users when purpose & type of event is unchanged)*

Name of Organization _____

Contact Name/Title _____

Phone # _____ *Fax #* _____ *Email* _____

Date/Time Requested (including setup and cleaning) _____

Statement of Policy (on file) has been previously read and is agreed to and accepted by all parties and representatives of groups or parties, whose signature is presented below: In signing this policy, all parties agree to the conditions and limitations imposed herein and by other Town policies, formal or informal. Kitchen use: \$25 fee.

By: _____

By: _____
Secretary, Town of Lincoln

Print Name & Title _____

FOR (Organization) _____ Date: _____