**WHATELY TOWN HALL USE APPLICATION**

**WHATELY TOWN HALL**

**194 CHESTNUT PLAIN ROAD**

**WHATELY, MA 01093**

Mailing Address: Town Offices, 4 Sandy Lane, South Deerfield, MA 01373.

Office: Telephone #413-665-4400 ext. 1; Email: [adminassist@whately.org](mailto:adminassist@whately.org)

**Applicant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information:**  **Phone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Type of Applicant**: (please check)

□ Whately Resident □ Whately Based Organization/Non-Profit/ Business □ Other

**Type of Event**: (please check)

□ Meeting □ Workshop □ Lecture □ Concert □ Theatre □ Rehearsal □ Craft Fair □ Other

If other please describe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requested room:** (please check)

* Meeting room
* Auditorium

*\* A user fee shall be paid in accordance with the table below as set forth in Section 5.0 of the Town Hall Building Policy.*

**Requested date(s) of use**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Requested time of use**: \_\_\_\_\_\_\_\_\_\_ am/pm to \_\_\_\_\_\_\_\_\_\_\_\_ am/pm (include time for set-up and clean-up)

**Is the event open to the public**: (please check)

□ Yes □ No

**Estimated number of attendees:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Please review the insurance and security deposit requirements on the next page of this application)*

**Will food be served:** (please check)

□ Yes □ No

**Will equipment or furniture be brought into the building:** (please circle)

□ Yes □ No

*(please note that all equipment and furniture must be approved by the Town Administrator or his/her designee and may not be allowed at the discretion of the Town)*

If yes, please describe the equipment and furniture \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Tables and Chairs supplied by the Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*please note – no drinks are allowed on the wooden tables or chairs*.

**Audio-Visual Needs:**

* Wireless microphone
* Wired microphone
* Projector (auditorium only)
* Flat panel TV (meeting room only)

**Lift Elevator Training:**

* Yes
* No

**Auditorium Stage Lighting:**

* Yes
* No

**User Fee:**

A user fee shall be paid in accordance with the table below as set forth in Section 5.0 of the Town Hall Building Policy.

|  |  |  |
| --- | --- | --- |
|  | Whately Resident, Whately Based Organization  Whately Based Non-Profit Organization or Whately Based Business | All Others |
| Auditorium | No Fee\* | $150.00 for up to 4 hours |
| Meeting Room | No Fee\* | $75.00 for up to 4 hours |

*\* If a fee is charged to attend the event then the user shall pay the rate for “All Others”*

*Please submit the user fee at the time of reservation.*

**Insurance Requirement:**

Insurance is required for events over seventy-five (75) people as required by Section 7.0 of the Town Hall Building Policy in the amount and form as stated below

* General liability insurance of at least $1,000,000 bodily injury and property damage liability, combined single limit with a $2,000,000 annual aggregate limit and umbrella liability of at $2,000,000 per occurrence.
* The Town of Whately shall be named as an additional insured.

*Please provide proof of insurance seven (7) days prior to the event*

**Security Deposit Requirement:**

A $100 security deposit is required for events over fifty (50) people as required by Section 6.0 of the Town Hall Building Policy.

*Please provide a separate payment for the security deposit at the time of reservation.*

*Deposits will be returned within 14 days after the event in accordance with the Town Hall Building Policy.*

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

The undersigned agrees to abide by all conditions set forth in this Application and the Town Hall Building Policy as established by the Whately Selectboard, including but not limited to indemnification and liability, the payment of a user fee, the payment of a refundable security deposit, and obtaining event insurance. The undersigned further agrees to be responsible for the event or activity and to ensure that the attendees follow the rules of usage and conduct as set forth in the Town Hall Building Policy.

Further, the undersigned individual or organization applying for the use of Town Hall, in consideration of the use of Town Hall, hereby agrees to indemnify and hold harmless the Town of Whately and its officers, employees and agents from any claims asserted by any person for damages for personal injuries including loss of life and/or for loss of property and arising from or related to an event or incident occurring on or about the Town Hall in use by the undersigned during the time of such use.

Name of Applicant (and organization if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return this completed application and return it with appropriate fee and security deposit, if applicable, to:

Town Administrator’s Office, 4 Sandy Lane, South Deerfield, MA 01373,

\*\*\*\*\*\*\*\*\*\*DO NOT FILL OUT BELOW THIS LINE\*\*\*\*\*\*\*\*\*\*

|  |
| --- |
| *For office use only:*  Received by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Certificate of insurance required: Yes: \_\_\_\_\_\_No: \_\_\_\_\_\_  If yes, date due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Security deposit required: Yes: \_\_\_\_\_\_No: \_\_\_\_\_\_  If yes, date received: \_\_\_\_\_\_\_\_\_\_\_\_\_  User fee required: Yes (and amount): \_\_\_\_\_\_No: \_\_\_\_\_\_  If yes, date received: \_\_\_\_\_\_\_\_\_\_\_\_\_  Other special conditions or restrictions placed on this event: Yes: \_\_\_\_No: \_\_\_\_\_  Approved by the Selectboard or Town Administrator:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |