

# SELECTMEN MEETING ROOM

## REQUEST USE FORM

(Please print)

REQUESTED BY:

Person(s) or organization: \_\_\_\_\_

Address: \_\_\_\_\_

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

DAY(s) and DATE(s): \_\_\_\_\_

TIME: \_\_\_\_\_

(From – To//A.M. or P.M.)

PLEASE FILL OUT & SUBMIT FORM TO TOWN CLERK

**\*\*AT LEAST 7-14 DAYS PRIOR TO EVENT\*\***

\_\_\_\_\_(SIGNATURE)

\*\*\*After hours use\*\*\*

PLEASE CONTACT THE SELECTMEN'S OFFICE TO MAKE ARRANGEMENTS FOR THE KEY

(781) 294-1316