



BAY ROBERTS

CARVED BY THE SEA

APPLICATION FOR USE OF THE BAY ROOM

DATE: _____

ALL APPLICATIONS FOR USE OF THE BAY ROOM MUST BE SUBMITTED IN WRITING IN THE FOLLOWING FORMAT

1. Name of sponsoring person, firm, corporation or association:

2. Address: _____
_____ Telephone: _____

3. Contact Person: _____

4. Telephone/Cell: _____ Email: _____

5. Description of proposed event(s): _____

| 6. Event Schedule | Date(s) | Time(s) |
|-------------------|---------|---------|
| Setup/ | _____ | _____ |
| Date(s) | _____ | _____ |
| Cleanup | _____ | _____ |

7. Special Services, equipment, staff required (if any): _____

Please note additional charges will be added based on the needs

