



905-895-5193 Ext. 2614  
Fax: 905-953-5113 E-mail: halls@newmarket.ca

## APPLICATION FOR RENTAL OF HALL/MEETING ROOM

<b>NAME OF APPLICANT:</b>		
<b>NAME OF ORGANIZATION:</b>		<input type="radio"/> Non-Profit
<b>MAILING ADDRESS:</b>		
<b>POSTAL CODE:</b>		
<b>EMAIL:</b>		
<b>HOME/CELL PHONE:</b>		
<b>WORK PHONE:</b>		

<b>TYPE OF EVENT/MEETING:</b>		
<b>NUMBER OF PARTICIPANTS:</b>		
<b>ROOM/HALL YOU ARE REQUESTING:</b>		
<b>DATE(S) OF EVENT:</b>		
<b>START/END TIME OF EVENT:</b>		<b>ACCESS TIME:</b>

If applicable -Are Kitchen Facilities Required?  Yes  No

Are you serving alcohol?  Yes  No

*For any event - Liability Insurance is mandatory*

Will you be purchasing Liability Insurance through the Town of Newmarket or through your own provider?  
 Town  Own provider

Room Set-up by the Town Required?  Yes  No

If Yes, please choose a preferred set up...

- Boardroom Style  Classroom Style with Head Table  Open Square Style  
 Regular Banquet Style  Theatre Style with Head Table

Will there be music played and/or dancing?  music  music & dancing  none  
\*Please be aware SOCAN/Resound Tariff fees may apply

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