



CITY OF PORTSMOUTH, NEW HAMPSHIRE

ROOM RESERVATION - MUNICIPAL COMPLEX

INSTRUCTIONS: Please print or type all required information clearly. Incomplete applications will not be accepted. This application will be considered based upon City Council Policy dated October 5, 1998. Forms must be submitted and approved by the City Clerk's Office 7 days prior to event.

APPLICANT INFORMATION

Name: _____ Organization: _____

Address: _____ City/State/Zip: _____

Daytime Telephone: _____ Evening Telephone: _____

CONTACT PERSON INFORMATION

Name: _____ Secondary Contact: _____

Address: _____ City/State/Zip: _____

Daytime Telephone: _____ Evening Telephone: _____

RESERVATION INFORMATION

Type of Event/Meeting: _____ Date: _____ Time/Duration: _____

Number Attending: _____ Room Requested: _____
(Conf. Room A, Council Chambers, Portsmouth Room)

Number of Tables Needed/Layout: _____
(Attach separate sheet if needed for sketch)

Special Equipment (if needed): _____

Are you Serving Food/Beverages: YES/NO Description: _____
(All requests for food/beverages require approval)

CERTIFICATION

I, the undersigned, hereby acknowledge and will comply with the following:

- I understand that my reservation may be cancelled at any time as City staff, boards, and activities have priority to use these rooms.
- No smoking or alcoholic beverages are allowed inside City Hall.
- Food and/or beverage use is only authorized under the required approval process. You are responsible for cleanup and removal of leftover food and beverage debris.
- No admission may be charged without written permission of the City Manager.
- By signing this form, you are hereby liable for any and all costs associated with the cleaning of the room and any damages to City property.

Signature: _____

Date: _____

Approved by: _____

Date: _____