

Barnstable Senior Center Room Rental Request Form
Person / Club/ Group Interested in Renting Facility

Name of Organization: _____

Contact Person: _____

Mailing Address: _____

Phone: _____ Cell Phone: _____

Email: _____

Reason for Rental of BSC:

Date (S) and Time of Event:

How Many Attendants:

Do You Need the Kitchen?

Will You Have Entertainment?

Will you have a clean-up / set-up crew?

Are you aware of our non-smoking/no alcohol policies?
