

BRANFORD RECREATION DEPARTMENT

BIRTHDAY PARTY ROOM USAGE FORM

BRANFORD RESIDENT'S ONLY

NAME _____

ADDRESS _____

HOME PHONE _____ WORK PHONE _____

CELL PHONE _____ E-MAIL ADDRESS: _____

1ST DATE REQUESTED: _____ 2ND DATE: _____

TIME: FROM _____ TO _____ (Please include set up time)

AMOUNT OF PEOPLE _____ (Children & Adults)

SET UP REQUESTED: _____

(ie: 3 long tables with 15 chairs around, long table for cake, presents etc.)

FEES :

MONDAY - FRIDAY \$50.00

9:00A.M. TO 5:00P.M. OR 6:00P.M. TO 9:30P.M.

SATURDAY(ANY 4 HOUR SLOT) \$75.00

9:00 A.M. TO 9:00 P.M.

MAKE CHECKS PAYABLE TO **"TREASURER - TOWN OF BRANFORD"**

In consideration of the use of the Branford Recreation Department, I certify that all information given is accurate and I understand and accept full responsibility for the conduct of the group and any damages to equipment or the facility. Please be sure to leave our rooms neat and throw all party garbage in the dumpster located in the parking lot.

****NO ALCOHOL IS ALLOWED IN THE BUILDING OR ON THE PREMISES****

SIGNATURE: _____ DATE: _____

Please mail form with payment to "Branford Recreation Department"
Attn: Andrea Kenney
46 Church Street
Branford, CT 06405

Forms can also be submitted to our office. Office hours are from 8:30 a.m. to 4:30 p.m. Mon - Fri. Call the office at 488-8304 with any questions.

