



Northport
Village Corporation

FACILITIES USE REQUEST FORM

Date 7/1/23
 Name GAYLE KOYANAGI
 Address 3 MAPLE ST
 E Mail gkoyanagi20@gmail.com
 Telephone # 207-338-7727
 Northport/Bayside Resident? N Bayside taxpayer? N
 Space Requested: Community Hall Community Room
 Rental
 purpose Scottish country dancing

Rate: Hourly (\$25/hr) _____ Day (\$150/day) _____
 Kitchen Usage Fee (\$50/day) _____ (when food is involved, not beverages only)
 Chairs - \$50.00/day # of chairs requested _____
 Tables - \$50.00/day # of tables requested _____
 Proof of Insurance must be received a minimum of 30 days prior to the event and
 attached to this document _____ (date received)
 Date and time
 requested 7/1/23 6:30 - 9 pm

By signing this document, you agree that you are the responsible party for this event, and you have read the community hall usage rules and agree to abide by them.

Signed _____ Rental payment is due within 7 days of approval of this reservation request.

Payment received \$ _____ By _____
(NVC office admin.) Date _____