

Plymouth Memorial Hall

Special Events Application

Wedding Ceremony/Reception



Event Information

Couples Name	
Point of Contact	
Purpose	

Event Type Ceremony Reception Other (please specify) _____
 Cocktail

Date Requested Event Times Requested

Load In Requirements:

Anticipated Crowd Size _____

Do you have a wedding coordinator _____

Do you have a cateror in mind _____

Will you have a DJ or Band _____

Will there be vendors? Liquor Photo Booth DJ
 Food Photographer

Notes regarding services provided:

Point of Contact Information

Name _____
Address _____
Email _____
Phone _____
Website _____

Person responsible for planning and decorating _____

Person responsible for vendor communications _____

Person responsible for floor plan _____

Special Requests Main Auditorium Access to Kitchen
 Blue Room Projector/Screen
 Green Room

Equipment Request:

How did you hear about us: _____

General Information

When reviewing information below we ask that you initial each line item to note that you have read and understand the items within this list. For additional questions or concerns at any time please contact the Hall Director.

- _____ Parking: Overseen by a third Party Park Plymouth, town nor Memorial Hall are responsible
- _____ Use of Pyrotechnics or any flames is strictly prohibited
- _____ Use of Haze and or fog machines is strictly prohibited
- _____ All vendors must remove all belongings at the end of the night, no room for storage at the facility nothing can be left behind and must be scheduled accordingly
- _____ General Liability is required by the renter At least \$1,000,000 Bodily Injury, & Property Damage, Liability, \$3,000,000 aggregate with Town listed as Additional Insured
- _____ Liquor Liability is required if alcohol is being served
- _____ TIPS certifications are required for anyone serving liquor
- _____ Renter is responsible for all items brought in as well as removal of all items before closing
- _____ Renter is required to contract their own services
- _____ Smoking is Prohibited from inside the facility, must be 25 feet from doors

Is there any other details or information you feel is important for the Hall Staff to know

By Signing below you acknowledge that you have completed the application to the best of your ability. You also note that you agree to the above general information. Additionally a \$250 deposit is required in order to place your date on hold. Once the application and the deposit has been received the POC on the application will receive a confirmation call/email from the Hall staff to ensure the dates are held. Following one week from application POC will receive a formal contract agreement.

_____ *signature of applicant*

_____ *date*

_____ *signature of Hall Director*

_____ *date*

HALL USE ONLY	
Room Requested: _____	Date Held: _____
Rental Fee: _____	
Rate Custodial: (\$35/hr. per/c) _____	
Additional Fees: _____	
Reason: _____	