

MANCHESTER-BY-THE-SEA PARKS AND RECREATION DEPARTMENT TOWN HALL – 10 CENTRAL STREET, MANCHESTER-BY-THE-SEA, MA 01944

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SINGING BEACH NON- PROFIT USER GROUP REQUEST FORM

Today's Date:			
Group's Name:	Contact Person: Work Phone: Cell/Mobile Phone:		
Mailing Address:			
Contact Person's Email Address:			
1. Date(s) Requested:	Time of Use:	Group Size:	# of Vehicles:
2. Date(s) Requested:	Time of Use:	Group Size:	# of Vehicles:
3. Date(s) Requested:	Time of Use:	Group Size:	# of Vehicles:
4. Date(s) Requested:	Time of Use:	Group Size:	# of Vehicles:
***Fees: \$100.00 per bus/van per day req Group reservations should be made with as mu made payable to the Manchester Parks & Recre other arrangements have been made in advance	eation Department. Final payments are du	mber of groups that we according at least one week in adva	ept each day. Checks should be unce of the groups' trip unless
All groups must be in compliance with Chrishttp://malegislature.gov/Laws/SessionLaws	· · · · · · · · · · · · · · · · · · ·	2012. Details of this law of	can be found at:
I am applying to bring my group to Singing Bed of signature, payment of fee signifies my under	0 0	· ·	gree to abide by them. In absence
Signature of Contact Person		Date	