

**HYANNIS YOUTH & COMMUNITY CENTER**

**141 Bassett Lane**

**Hyannis, MA 02601**

**Phone: 508-790-6345 / Fax: 508-790-6279**

**Permit Application For Building Use**

- INSTRUCTIONS:
1. Complete each section of the application.
  2. We strongly suggest providing alternate dates and times.
  3. Return application to the HYCC - 141 Bassett Lane, Hyannis or fax 508-790-6279
  4. Please do NOT attach or enclose deposits unless expressly instructed to do so.

*Permits are awarded on a first-come, first-served basis at the manager's discretion. Application does not guarantee permission.*

**Available for Rent:**

HYCC	141 Bassett Lane, Hyannis	Shepley Community Room
HYCC	141 Bassett Lane, Hyannis	Conference Room

First Choice:

Room: \_\_\_\_\_

Day/s: \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

Start Time: \_\_\_\_\_

End Time: \_\_\_\_\_

Alternate Choice:

Room: \_\_\_\_\_

Day/s: \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

Start Time: \_\_\_\_\_

End Time: \_\_\_\_\_

**PURPOSE:** \_\_\_\_\_

Head Count: \_\_\_\_\_ Admission to be charged: \_\_\_\_\_ Accepting Donations?: \_\_\_\_\_

Does your group carry liability insurance? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, amount of coverage: \_\_\_\_\_

***\*PLEASE SEE FOOD & BEVERAGE POLICY ON REVERSE SIDE\****

**GROUP NAME:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**ADDRESS:** Street \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

**DAYTIME PHONE #:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

Manager's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Manager's Notes: \_\_\_\_\_ Fee: \_\_\_\_\_