Temple Town Common Reservation Form

Name/Group/Committee:
Email Address:
Phone Number:
Date Requested:
Start Time:
End Time:
Approximate Number of People:
Is event open to the Public: YesNo
Purpose For Use:
By signing this form, I agree that the Town Common will be left in the same condition as it was before my event and I agree that I will not hold the town of Temple responsible for any accident
or injuries that may happen during my event.
SignatureDate
 Applicant may be required to provide sanitary facilities Larger parties may need to provide road safety cones Please note other areas not in use by your event will be open for use to the general publication.
** Approval of this request is at the discretion of the Select board**
Town ApprovalDate
Reason Denied
Additional Comments