



## Application and Reservation Form

To introduce a greater number of people to the unique character of the Industrial Trust Bank Building and to further the appreciation of this cultural resource, the Westerly Land Trust (WLT) is pleased to offer this beautiful facility for private functions pursuant to the Event Space License Agreement. License fees are critical to alleviate maintenance costs associated with preserving this historical structure.

### I. LICENSE REQUEST

REQUESTED EVENT DATE(S): \_\_\_\_\_

REQUESTED EVENT TIME(S): \_\_\_\_\_

*\*Note: Be sure to request time for the event itself, set-up and take-down time.*

### II. FEE SCHEDULE

LICENSE FEE: WLT members - \$60.00/hr; non-members - \$75.00/hour for presentations, workshops, programs, weddings, etc.  
Contact us for art exhibit and non-profit organization fees.

OTHER FEES: \$50.00 Reservation Fee and \$250.00 Damage Deposit

### III. TOTAL FEES

Total License and Others Fee for requested Event Date(s):

\_\_\_\_\_

### IV. CONTACT INFORMATION

All requests for use of the Facilities should be made to the Events Coordinator, Harold Beal at 401-596-7997, and are subject to (a) availability; (b) execution of



9. Billing address for applicant (please provide contact name with address):

\_\_\_\_\_  
\_\_\_\_\_

10. Evidence of liability insurance for (a) personal injury to WLT or the applicant's officers employees, agents, representatives, volunteers, invitees and guests, and (b) property damage to the Facility must be provided by the licensee at least ten (10) days prior to the event. The certificate of insurance shall name the Westerly Land Trust and the Royce Family Fund as additional insureds.

Insurance Provider name, address, telephone and fax:

\_\_\_\_\_  
\_\_\_\_\_

11. Name, mailing address, telephone number for two responsible persons:

Contact 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Contact 2

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

*\*Note : Town of Westerly may require one-time event license 45 days in advance.*

**VI. APPLICANT**

Applicant: \_\_\_\_\_

Name/Title of Person signing for Applicant: \_\_\_\_\_

Signature: \_\_\_\_\_ Date:  
\_\_\_\_\_

*Checks are payable to The Westerly Land Trust. Please mail to PO Box 601,  
Westerly, RI 02891.*