

TOWN OF NEW CANAAN RECREATION DEPARTMENT
677 SOUTH AVENUE, POST OFFICE BOX 852
NEW CANAAN, CONNECTICUT 06840

Contract for Rental of Waveny House

New Canaan Residents and New Canaan Organizations- New Canaan residents and organizations may rent Waveny House for their OWN USE up to two years in advance. The Director of Recreation has the right to refuse or cancel use by a New Canaan resident or New Canaan organization if there is evidence that this prospective renter is in reality renting Waveny House for someone who is not a New Canaan resident or member of their immediate family.

___ House Rental (\$1,500)(non-refundable \$375 Deposit)
___ Room Rental (special rate)
___ Outside Only (special rate)
___ Walled Garden (\$250 donation)
___ Rehearsal (special rate)
___ Rental Bond (\$750)

Non-Residents and Non-New Canaan Organizations

___ House Rental (\$2,650)(non-refundable \$665 Deposit)
___ Room Rental (special rate)
___ Outside Only (special rate)
___ Walled Garden (\$250 donation)
___ Rehearsal (special rate)
___ Rental Bond (\$750)

Rental Information

RENTAL DATE: _____

RENTAL TYPE EVENT: _____

AREA(S) TO BE USED: * _____

*Library and Billard Room not available

APPROXIMATE HOURS OF RENTAL: * FROM _____ TO _____

*Curfew 1:00 a.m., 10 hours maximum

NUMBER OF EVENT PARTICIPANTS: _____ *(Waveny House capacity is 160)

Renter Information

NAME OF INDIVIDUAL RESPONSIBLE FOR RENTAL:

NAME OF ORGANIZATION, IF APPLICABLE:

RESIDING ADDRESS: _____

TELEPHONE: (H) _____ (W) _____ (Cell) _____

EMAIL ADDRESS: _____

(SELECT ONE)

- alcoholic beverages WILL be sold during the event (see regulations)
- alcoholic beverages WILL NOT be sold during the event

I have read the regulations concerning the rental use of Waveny House and by signing my name below, I agree to abide by them.

SIGNATURE _____ DATE _____

Office Use Only
(CONTRACT NOT VALID UNTIL SIGNED BY THE RECREATION DIRECTOR)

- APPLICATION APPROVED Date _____
- APPLICATION DISAPPROVED Date _____

NUMBER OF POLICE REQUIRED _____

RECREATION DIRECTOR or his authorized agent _____ DATE _____
Signature

Special Rates as determined by the Recreation Director
____ Hourly Charges before 4:30 billed at \$____/hour _____
____ Hourly Charges after 4:30 billed at \$____/hour _____
____ Rehearsal- 2 hours total, minimum charge \$250 _____
____ No Fee
____ Special Fee _____

10/1/10