

2024 NON-PROFIT REGISTRATION FORM

SEABROOK OLD HOME DAYS
TOWN OF SEABROOK
SEABROOK RECREATION DEPARTMENT
PO Box 456
311 Lafayette Road
Seabrook, NH 03874
(603) 474-5746

DATE OF EVENT – SAT. AUGUST 17th (Rain date Sun. August 18th)

NAME OF ORGANIZATION/GROUP: _____

CONTACT PERSON: _____ PHONE# _____
(Name)

MAILING ADDRESS: _____

EMAIL _____

Best time to call: _____

Has your group participated in the Old Home Days Event before this year?
Yes / No or 1st time (Circle one)

NAME OF ACTIVITY (S):

1. _____
2. _____
3. _____
4. _____

Request for location: _____

TENT REQUEST

(Due to cost, the large tents are limited)

Big Top Tent Location _____ (10'x10' spaces)

Pop-Ups _____ (10'x10' first come first served)

Does your group need tap water available: Yes / No (no individual hookups) (Circle One)

Electrical needs: *(list the number and type of items that will be plugged in)*

_____ Item _____ Voltage _____

_____ Item _____ Voltage _____

_____ Item _____ Voltage _____

_____ Item _____ Voltage _____

_____ Item _____ Voltage _____

Request for Tables/Chairs: (Fill in amounts needed)

Tables: _____ (new groups limited to two/old groups no more than used in the past)

Chairs: _____

***NOTE – CHAIRS & TABLES WILL BE STACKED IN YOUR AREA
FOR YOUR GROUP TO SET UP AS NEEDED**

(Due to cost, the large tents are limited)

Additional Comments or Requests: _____