

# 2025 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 16<sup>th</sup> (Rain date Sun. August 17<sup>th</sup>)

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 1<sup>st</sup> 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:** \_\_\_\_\_