



# Rental Request for Sippican Tennis Club

## Renter Information

Applicant Name(s)	
Mailing Address(es)	
Email(s)	Phone(s)

## If renter is non-member, please list club member sponsor

Member Name	
Mailing Address	
Email	Phone

## Event Coordinator Information (if any)

Coordinator Name	Company Name
Mailing Address	
Email	Phone

## Event Information

Desired Date	Event Start & Stop Times
Type of Event	Estimated Total Number of Attendees
Will liquor be served? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, a licensed bartending service company must be contracted and provide evidence of liquor liability coverage for a minimum of \$1 million and name Sippican Tennis Club as Additionally Insured.

*To request a Sippican Tennis Club rental, please complete this form and submit it to:*

**membership@sippicantennisclub.com**

or

**Sippican Tennis Club**

**P.O. Box 272**

**Marion, Massachusetts 02738**