REQUEST TO USE THE BRUNNER FARMHOUSE / 2015

(Hard Copy version. Print form, fill in manually.)

Date: _____

Name of Organization: _____

Requested purpose for using the House: _____

Is the requesting organization a Broomfield based Non-Profit? ☐ Yes ☐ No

Size of group expected at the house (suggested maximum occupancy 33) _____

Requested use date(s) _____ Beginning and ending times_____

Is this a monthly occurrence? _____ If not, how often? _____

Any special requests or information you wish the Committee to consider?

CONTACT INFORMATION

Primary Contact Name: _____ Home Phone: _____

Cell Phone: _____ Email: _____

Home Address: _____

Secondary Contact Name: _____ Home Phone: _____

Cell Phone: _____ Email: _____

Home Address: _____

The mission of the Brunner Farmhouse and Gardens is to provide a community gathering place for the citizens of Broomfield. In order to continue to offer this amazing resource and connection to our past, we ask that all organizations utilizing the house, give back to the property in some way.

Below are some suggestions only. You may come up with your own ideas, suitable to your needs, which you may discover as you use the facility or are specific to your interests. You may also talk with the Brunner House Committee to discuss ideas. Call 303-460-6800 for current Committee contact information.

Please check the item(s) your group will commit to:

☐ Purchase of additional matching folding chair(s) $72 each

☐ Maintenance of outside growing bed (instructions below)

(The commitment for the maintenance of outside growing beds will be for a full growing year. The Brunner House Committee will provide a maintenance manual and direction on which beds are available for sponsorship.)

☐ Cash Donation(s); *specify amount $* _____

Date on which obligation noted above will be fulfilled: _____

Light refreshments are allowed. All trash, including food remains, must be deposited in outside dumpster at the conclusion of your event. Please leave the place as you found it and sign the checkout sheets. Lock all doors when leaving. Thank you.

Signature: _____ Date: _____

Return form to BCAH, P.O. Box 681, Broomfield, CO 80038-0681, BCAH@ArtsinBroomfield.org, or fax to: 303-464-1335.

All requests will be reviewed and approved by the Brunner Farmhouse Citizen Advisory Committee.

Administrative use only: