



Connecticut Valley Hindu Temple Society

Sri Satyanarayana Swamy Temple



11 Training Hill Rd, Middletown CT 06457

Phone: (860)346-8675 Email: ContactCVHTS@cvhts.org Web: www.cvhts.org

TAX ID: 06-0999622

Application for Use of Facility at Temple

Applicant Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home: (____) _____ - _____ Cell: (____) _____ - _____ Email: _____

Facility Required on Date: _____ Time From: _____ To: _____ Est. Attendees: _____

Purpose: _____

Hall Rates: All rentals are for 4-hour events; \$50 for additional hour; 10% discount for Life Members

Hall Type/Service	Per event	By Hours	Only for Meetings/Classes
Narayana Hall (Max Capacity 150)	<input type="checkbox"/> \$401 for event		
Satya Hall (Max Capacity 200)	<input type="checkbox"/> \$451 for event		
Narayana Hall - With Priest Services (Marriages)	<input type="checkbox"/> \$601 for event		
Satya Hall - With Priest Services (Marriages)	<input type="checkbox"/> \$651 for event		
Dining Hall	<input type="checkbox"/> \$151 for event		
Back Room: (Behind Narayana Hall)	<input type="checkbox"/> \$101 for event	<input type="checkbox"/> \$51 for 2 hours	<input type="checkbox"/> \$25 per hour
Classroom A or B:	<input type="checkbox"/> \$51 for event	<input type="checkbox"/> \$25 for 2 hours	<input type="checkbox"/> \$15 per hour
Classroom C or D:	<input type="checkbox"/> \$101 for event	<input type="checkbox"/> \$51 for 2 hours	<input type="checkbox"/> \$25 per hour

Additional Services: Wifi - \$25/event Audio System - \$51 After Event Cleaning Charges - \$101

Payment:

Total Paid: \$ _____ Invoice Number: _____

Mode of Payment: Cash / Credit Card / Check (Payable to CVHTS) Check # _____

Instructions:

1. Applicant will comply with the stated policies of the temple, specifically prohibition of smoking, non-vegetarian food or alcoholic beverages anywhere on the temple property
2. Applicant provides own insurance: CVHTS is not liable for any damages caused by applicant's activities/program attendees. Applicant is liable for any damage to the temple property, facilities, harm to self and guests
3. Facilities must be used appropriately during the applicant's occupancy and restored to its original condition to the satisfaction of the coordinator or his/her designee.

I agree to the above conditions and will maintain the sanctity of the facility.

Signature: _____

Date: _____

May Lord Sri Satyanarayana Swamy bless us all !!!