

PAVILION RENTAL APPLICATION

GROUP NAME: _____

CONTACT PERSON: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

DATE OF EVENT: _____ TIME _____ / _____
(FROM) (TO)

___ MOUNTAINDALE PARK NUMBER OF PEOPLE _____

Describe in detail the activity and in what manner you intend to utilize the facility.

This reservation will be issued on the condition that the applicant holds the Town of Fallsburg free and harmless from any and all claims for damage arising out of illness, accident, mischief or any other claim resulting from the consumption of alcohol beverages, by the applicant and their guests.

I have read and understand the information noted above and back of this application, and will be the responsible party organizing the event.

SIGNATURE: _____ DATE: _____

.....
OFFICE USE ONLY

USAGE FEE _____ DATE PAID _____

CASH ___ CHECK # _____ RECEIPT # _____

DEPOSIT _____ DATE PAID _____

CASH _____ CHECK # _____ RECEIPT # _____

DATE RETURNED _____ SIGNATURE _____

PAVILION RENTAL

You must be 21 years of age or older to rent the pavilion.

A separate payment for clean-up deposit is required. The amount of this deposit is equal to the usage fee. It will be returned to you providing pavilion and grounds clean-up meets our expectations. Facility must be vacated by 7:00PM.

Hours of operation are 11:00AM to 7:00PM.

The following is included with your pavilion rental;

-Kitchen with deep sink, range and refrigerator.

_BBQ pit.

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PAVILION RATES

<u>GROUP SIZE</u>	<u>RESIDENT</u>	<u>NON-RESIDENT</u>
75 AND UNDER	\$75.00	\$200.00
76-150	\$175.00	\$300.00
151-300	\$250.00	\$400.00

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OVER 500- SPECIAL PERMIT REQUIRED FROM THE TOWN BOARD, AND YOU MUST PROVIDE INSURANCE CERTIFICATE.
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Excessive noise of any kind, which infringe on the rights of others who are patronizing the park facility is not permitted and can result in termination of your event with no refunds.

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This application is subject to approval of the park commission.

___ Approved

___ Disapproved

REASON FOR DISAPPROVAL:

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