

TOWN OF WAPPINGER RECREATION FACILITY REQUEST rev 5/16 dl

Facility Info

Facilities Requested:	
Dates of Event(s): Attach schedule if needed	
Time of Event(s):	

Applicant Info

Name of Sponsoring Organization:			
Circle One:	Non- profit 501(c)3	For Profit	Private Event
Address:			
Designated contact:			
Phone:			
Cell:			
Email:			

REGULATIONS FOR USE OF FACILITIES

1. NO alcoholic beverages are permitted in Town of Wappinger parks.
2. All fields are to be groomed at the end of playing for next users of field.
3. All adjacent areas should be policed for trash and picked up prior to leaving.

Failure to comply with these regulations will result in immediate revocation of future facility uses.

I have read and understand the regulations for the use of facilities in the Town of Wappinger and will comply with these regulations. The undersigned warrants and represents that he/she/they have the authority to sign this agreement on behalf of (Name of organization) _____ . (Name of Organization)

_____ shall indemnify and hold harmless the Town of Wappinger against all claims on account of injury, loss or damage arising or alleged to arise out of or in connection with the occupancy of the Town of Wappinger premises including all expenses incurred by the Town of Wappinger in the defense settlement or satisfaction thereof including expenses of legal counsel. In addition, (Name of organization) _____ agrees to provide to the Town of Wappinger, a **Certificate of Insurance**, which indicates a current Commercial General Liability policy is in force, with (Name of organization) _____ as the first name insured written with an insurance company with an A.M. Best's rating of "A" or better. The occurrence limit must indicate a limit not less than \$1,000,000.00. The Town of Wappinger must be named as an additional insured. No approval is granted or implied unless and until all requirements as outlined above has been submitted to, received and accepted by the Town of Wappinger.

I UNDERSTAND THAT THIS APPROVAL DOES NOT BECOME EFFECTIVE UNTIL A \$1,000,000.00 LIABILITY INSURANCE POLICY NAMING THE TOWN OF WAPPINGER AS AN ADDITIONAL INSURED IS SUBMITTED.

Signature Print Date

Fee Paid: _____ Check #: _____ or Cash _____ Date: _____

RECREATION COMMITTEE CHAIR
Ralph J. Holt

TOWN OF WAPPINGER



SUPERVISOR
Lori Jiava

RECREATION DEPARTMENT
Jessica Fulton, Director
Donna Lenhart, Secretary

TOWN BOARD
William H. Beale
William Ciccarelli
John Fenton
Michael Kuzmicz

20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590
WWW.TOWNOFWAPPINGER.US
(845) 297-4158 - Main
(845) 297-0720 - Direct
(845) 592-7433- Fax

Recreation Department

TOWN CLERK
Joseph P. Paoloni

Town of Wappinger 2016 Facility Usage Fees

Facility	# of Participants	Fee
Pavilion Use - one day	Less than 50	\$ 75.00
Pavilion Use - one day	More than 50	\$150.00
Building Use – one day	Up to 35	\$ 50.00
Park use - one day	Less than 50	\$ 75.00
Park use - one day	More than 50	\$150.00

Athletic Field - one day	2 teams no lights	\$ 25.00
Athletic Field with lights - one day	2 teams from 5pm	\$200.00

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4. Failure to comply with these regulations will result in immediate cancellation of facility use.