

# Town of Bedford Recreation and Parks Department

425 Cherry Street Bedford Hills, NY 10507 Telephone # 914-666-7004 Fax # 914-666-3863  
Facility-use # \_\_\_\_\_

## Bedford Hills Memorial Park Haines Road, Bedford Hills, NY Facility – Use Application

This application must be submitted to the Town of Bedford Recreation and Parks Department office at least two weeks (14 days) prior to date (or first date) of planned usage. Please read the facility-use policies, including insurance requirements, on the reverse side of this application.

- Name of Organization/Resident \_\_\_\_\_  
Address \_\_\_\_\_  
Municipality \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
- Area(s) requested: Swimming Pool Basketball Courts Main Field (Soccer)  
Lower Picnic Area Shelter Playground Softball Field Tennis Courts  
Other – Please describe \_\_\_\_\_
- Date requested: \_\_\_\_\_, \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Hours requested: From \_\_\_\_\_ am/pm To \_\_\_\_\_ am/pm  
Day of Week/Month Day Year (including set-up and break-down)  
Please indicate ALL program dates requested \_\_\_\_\_  
\_\_\_\_\_
- Please describe the event/program \_\_\_\_\_  
\_\_\_\_\_
- What supplies and/or equipment will you be bringing (other than food/beverages)? \_\_\_\_\_  
\_\_\_\_\_
- Are you requesting the use of alcoholic beverages? \_\_\_\_ (If so, a separate permit must be issued)
- Anticipated/planned total approx. attendance \_\_\_\_\_ Are they \_\_\_\_ all adults (over age 21)?  
OR \_\_\_\_ adults and children?
- Name of Person *in attendance and in charge of event/program* \_\_\_\_\_  
Daytime Tel. # \_\_\_\_\_ Alternate Daytime Tel. # \_\_\_\_\_

The above named person, on behalf of the organization, agrees to all facility-use policies as described on the reverse side of this application.

SIGNATURE OF APPLICANT

DATE OF APPLICATION

### PLEASE DO NOT WRITE IN THIS SECTION

TOTAL FEE CHARGED \$ \_\_\_\_\_ DEPOSIT \$ \_\_\_\_\_ BALANCE \$ \_\_\_\_\_

ALCOHOL REQUESTED? \_\_\_\_\_ INSURANCE RECEIVED? \_\_\_\_\_

AREAS APPROVED:

Sw pool  BB cts  Main fld (Soc)  Lwr Picnic  Shltr  Plgrd  Sftbl fld  Ten cts

Other and Misc. Info \_\_\_\_\_

Approved by SUPERINTENDENT OF REC. & PARKS \_\_\_\_\_ DATE \_\_\_\_\_