

TOWN OF PHILADELPHIA

33019 US ROUTE 11, PHILADELPHIA, NY 13673

Phone: 315-642-3421

APPLICATION FOR USE OF COMMUNITY FACILITIES

Today's Date: _____ Date(s) Requested: _____

Facility Requested: _____

INFORMATION ABOUT YOUR GROUP

Name of Organization or Individual: _____

Time: _____ to _____. Your supervisor in charge: _____

Mailing Address: _____

Telephone: (Day) _____ (Night) _____

INFORMATION ABOUT YOUR INTENDED USE OF MUNICIPAL FACILITIES

Purpose of Use: _____

Total Participants Expected: _____ Adults: _____ Children: _____

Is material or equipment required from municipality? Yes _____ No _____

If needed, state what types and for what purpose: _____

Residents (Number): _____ Non-Residents (Number) _____

Is an admission fee charged? Yes _____ No _____

If so, what will proceeds be used for? _____

AGREEMENT

The undersigned is over 21 years of age and has read this form and attached regulations and agrees to comply with them. He/she agrees to be responsible to the municipality for the use and care of the facilities. He/she, on behalf of

(Organization) _____ does hereby covenant and agree to defend, indemnify and hold harmless the Town of Philadelphia from and against any and all liability, loss, damages, claims, or actions (including cost and attorney's fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with actual or proposed use of Town of Philadelphia's property, facilities and/or services by (Organization) _____

Signature of Organization's Representative

Address: _____

Telephone Number: _____