

FACILITY USE/RENTAL APPLICATION

Hudson River Park/Pickleball Courts

| CONTACT INFORMATION | N (insurance certificate require | ed*) | | | |
|------------------------------|---|--------------------------|-----------------|-------------------------------|--|
| Purpose of requested use: | | | | | |
| Contact name (F/L) of persor | n responsible for event/field u | ıse: | | | |
| Application on behalf of: | \square Individual/Family | \square Group | Organ | nization/Club | |
| Name of Family/Group/Orga | anization: | | | | |
| Address: | | Town/Zip: | | | |
| Contact Phone: | | _ Cell Phone: | | | |
| Contact E-mail Address: | | | | | |
| • | UST provide a certificate of insui RIOR to date of the event/renta | _ | | ury as an additional insured. | |
| FIELD USE INFORMATION | N (attach additional informati | ion as necessary) | | | |
| Day(s) of week needed: | | Number of courts needed: | | | |
| Start Date: | | End Date: | | | |
| Start Time: | | End Time: | | | |
| Estimated Attendance: | Will admissi | on be charged? | ☐ Yes | □No | |
| Additional comments or requ | uests pertaining to your appli | cation: | | | |
| APPLICANT SIGNATURE | | | | | |
| Applicant Signature: | | | Date: _ | | |
| | OF | FICE USE | | | |
| Date Received: _ | Approved by: _ | Ρε | ermit issued: | | |
| Insurance Cert. re | ec'd? Field Use Fee re | ec'd? H! | HA signed/rec'c | d? | |