RIDGEFIELD PARKS & RECREATION FACILITY RESERVATION APPLICATION

| Date of Application: | | | |
|---|--|---|--|
| Room Requested (check one of the following): | | | |
| Charter Oak Room (\$90.00/hr*) | Elm Room (\$15) | hr) | |
| (\$30.00/hr* ea.) Sec. 1 | Maple Room (\$25/ | | |
| Sec. 2 | | hr) | |
| Sec. 3 | Copper Beech (\$25/ | | |
| ½ Gymnasium weekday: \$45.00/hr* | * Higher fees may apply | | |
| weekend: \$50.00/hr* | ringher rees may appry | to groups of foo. | |
| Reservation Deposit (if applicable) | Certificate of Insura | ance (required) | |
| EQUIPMENT for on-site use ONLY | | | |
| PA system Overhead Project | or TV & V | CR | |
| Remittance for all fees be made payable to Ridgeffe This reservation is subject to availability and is not applicant. The Department reserves all rights of ref | guaranteed until a written confir | | |
| Reservation Dates: | Rain | | |
| Date: | | | |
| Time Period: From | AM/PM To | AM/PM | |
| (Please | e include set up and clean up time |) | |
| Type of Activity: | | | |
| Name of Non Profit Organization: | | | |
| Contact Name: | Number of Po | eople in Group: | |
| Address: | Telephone: | Telephone: | |
| Email Address: | | | |
| Maintenance Instruction: Will you be serving foo (Indoor use only) Number of tables needed | Number of ch | airs needed | |
| Applicant is responsible for set up, clean up, and \$100.00 fee is required for maintenance staff. | breakdown of rooms. If appl | icant fails to do so, an additional | |
| The renting or sponsoring agency hereby agrees to Ridgefield Parks & Recreation Commission. Rente building or to its contents during the time that it is it the police are required, applicant must make proper responsibility to know the Parks & Recreation responsibility. | r agrees to accept responsibility n use and herewith provides pro arrangements with the Police D | for any damage caused to the of of insurance, if applicable. If | |
| I have read the rules relating to the use of desired fa | cility and agree to abide by thes | e rules: | |
| Signature of Applicant | | Date | |
| Signature of Facility Scheduler | | Date | |

