

**CONCORD TOWNSHIP
PARKS & RECREATION
APPLICATION FOR PERMISSION FOR USE**

TOWNSHIP PARK @ 725 SMITHBRIDGE RD.

- Field Sand Volleyball Walking Trail Bandstand
- Pavilion Rental – Fee: *NON-RESIDENT: \$100.00 / *RESIDENT: \$30.00
(Three (3) hour maximum)

ALL APPLICATIONS MUST BE FILED A MINIMUM OF FIVE (5) DAYS IN ADVANCE OF THE DATE DESIRED
CONTACT ALLISON O'DONOGHUE @ 610-842-2147 TO CONFIRM AVAILABILITY

NAME OF ORGANIZATION: (if applicable) _____

Insurance Co: _____
(attach copy of insurance certificate to application)

Policy # _____

Expiration Date: _____

CONTACT PERSON: _____

ADDRESS: _____

CONTACT PHONE NUMBER: _____ E-MAIL: _____

ARE YOU A RESIDENT OF CONCORD TOWNSHIP? _____

EVENT: _____

DESIRED DATE: _____ TIME: _____

TOTAL (APPROX.) NUMBER OF PERSONS: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

Liability Agreement

In consideration of permission by the Township of Concord for the use of building, grounds, and/or other facilities of the Township of Concord on the dates listed in this application, the undersigned being a duly-authorized officer or representative of _____ hereby agrees for and on behalf of said organization or group and for and on behalf of the individual members thereof to release the said Township of Concord and its agents, employees, and representatives of and from any and all claims for personal injuries, death, and property damage which may arise from or during the use of said buildings, grounds, and/or facilities pursuant to said permission, and do further agree to defend, indemnify and save harmless the said Township of Concord and their agents, employees, and representatives from any and all such claims.

I/We the undersigned have read above and understand and agree to comply with the rules and regulations on the reverse side.

Applicant's Signature: _____ Date: _____

!! NOTE !! Checks received for payment of Pavilion will not be cashed until after the event. In the event of a cancellation, your check will be returned to you. You may pay in cash if you prefer not to have your check held.

CHECK NO. _____ FEE REC'D: \$ _____ APPROVED: DENIED: