

FLORENCE TOWNSHIP
APPLICATION FOR USE OF PARKS

APPLICANT:

Group/Organization: _____

Name of Responsible Person: _____

Address: _____

Day Phone Number: _____ Night Phone Number: _____

Alternate Contact Person: _____

Day Phone Number: _____ Night Phone Number: _____

FACILITY REQUESTED:

John A. Roebling Park a.k.a. FAAD Building & Park + FAAD Park Roebling Park at Riverside Avenue

H. Kenneth Wilkie River's Edge Memorial Park Gazebo at H. Kenneth Wilkie River's Edge Memorial Park

Gazebo at Clark T. Carey Memorial EMS Volunteers Park at Boat Dock Other _____

+ \$25 fee and \$150 deposit (higher if non-resident)

** Use of inflatable jumpers, mechanical amusement rides/games, petting zoos, animal rides and anything deemed dangerous by the Township is prohibited**

DAY & TIME OF REQUESTED USE:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday _____
DATE/S

Hours of use: _____

Number of people attending event: _____*

* NOTE: *Florence Township* to be named as an **additional insured** for the day when # is over 25.

If necessary: Name of Insurance Company _____

Detailed description of use: _____

As the authorized representative of the above named group or organization making this application, the undersigned agrees to use the township facilities in accordance with the policies, rules and regulations established by the Township of Florence.

Date: _____ Signature: _____

DO NOT WRITE BELOW THIS LINE

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Date Received: _____ Received by: _____ Approved: Yes _____ No _____

Conditions: _____

Sent to Police Department _____ Public Works _____

Sent to Township Council for approval: yes ___ N/A ___

Notes: _____