

**Park Commission-Town of Rehoboth**

**REQUEST FOR USE OF FACILITIES**

**Please type or print clearly-File with the Park Commission**

**Facility Requested**

**Name of Organization**

**Name of Representative Filing**

**Address**

**Home Telephone**

**Cell Phone**

**Name of Person in Charge of Event**

**Address**

**Home Telephone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Date Requested:** \_\_\_\_\_ **Rain Date:** \_\_\_\_\_

**Start time:** \_\_\_\_\_ **End Time:** \_\_\_\_\_

**Type of Activity:** \_\_\_\_\_ **Approx. # of people** \_\_\_\_\_

**Price of Admission:** \_\_\_\_\_

**This form must be completed, with a copy of insurance certificate, plot plan, restroom facilities and dumpsters before it is submitted.**

**Dumpsters and Bathroom Facilities are the responsibility of the organization.**

**I have read the rules and regulations governing the use of Park Commission Facilities and agree to abide by them as well as additional conditions that may be requested by the Commission.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved by Commission** \_\_\_\_\_ **Date:** \_\_\_\_\_