

Town of Clinton - Pavilion Use Application

On Line Version - Printable

Mail completed form (and all required paperwork) to:

Daniel Harkenrider, Recreation Dir.

12 Friends View

Clinton Corners, NY 12514

Instructions:

- Fill in the date for which you are applying
- Pavilion Rental time is **8 AM to 7 PM** on requested date
- It is very important that all information is given for the contact person or the application will be void

Fees:

Resident \$150.00 Non-resident \$250.00 Organization \$350.00 Commercial Rental: \$700.00

Date Requested for Pavilion Use: _____

Name of Contact Person: _____

Contact Person Address: _____

Contact Person Phone: _____

Contact Person Email: _____

Insurance Provider: _____

(A Certificate of Insurance must be provided Please contact your Homeowners' Insurance Agent and request a Rider on your policy to cover the pavilion rental and your guests).

Group Size (number of people you intend on having in the pavilion): _____

Type of Activity (birthday party, anniversary party, etc): _____

Will Food Be Served? (Yes/No): _____

Special Requests: _____

General Information:

- No one will be allowed to rent the pavilion without:
 - o the Application,
 - o a copy of the insurance certificate,
 - o a separate deposit check in the amount of \$100.00 (**Refundable if kitchen & pavilion are clean at the end of the event**), and
 - o the rental fee (checks made payable to: **Town of Clinton**) returned to the Recreation Director at least four weeks prior to the function
- **Recreation Director should (Please check choice):** Return deposit check Shred deposit check
- Call the Recreation Director (914-489-0962) 2-3 days before the day of the function to get directions for getting the kitchen opened
- For further information contact:
Dan Harkenrider 914-489-0962 or email: Dan@TownofClinton.com

For office use only:

Rental Check # _____

Deposit Check # _____

Insurance ck. Rec'd _____