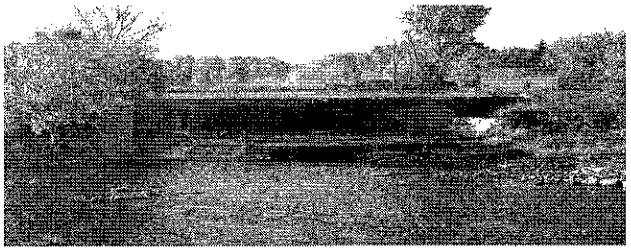
Board of Trustees

Village of Black River, New York



FACILITIES USE APPLICATION

Name _____ Today's Date _____

Organization _____

Telephone # _____ Date & Hours Requested _____

Check Facility (ies) Requested:

Municipal Offices Meeting Room ( ) Maple Street Park ( )

Maple Street Recreation Building ( ) Maple Street Pavilion ( )

Other ( ) Please Specify _____

* Certificate of Insurance provided? ( ) Yes ( ) No

Please give a brief description of planned activity: _____

_____

_____

Statement of Responsibility

I/We agree to assume responsibility for the facility/grounds requested above. I/We will ensure that all buildings and/or grounds are clean, neat and returned to the physical condition in which they were found. I/We agree to remove any garbage and recycling generated as a result of the above event. **No alcoholic beverages or glass containers are allowed on the premises.**

_____

Signature

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OFFICE USE ONLY

Approved ( ) at the _____ Village Board Meeting

Disapproved ( ) at the _____ Village Board Meeting

Reason for disapproval _____

Signature _____ Date _____

Any person with a disability who may need to make special arrangements to use the above facility (ies) may do so by calling the Black River Village Office at 773-5721 during business hours at least three days in advance of the planned activity. Thank you.

107 Jefferson Place
Black River, NY 13612

www.blackriverny.org

Phone (315) 773-5721
Fax (315) 773-5726