



TOWN OF BALLSTON FACILITY USE APPLICATION

Today's Date _____ Date Requested: _____ Time: _____ to _____

Type of Event _____

Name of Renter responsible for event: _____

Address of Renter: _____

Phone Number: _____ Email Address: _____

Facility requested for use: Community Room BLFD Memorial Park (Fireman's Grove) Jenkins Park

Fees *\$250 *\$150 *\$150

*Town residents will pay half price per rental.

Are you a Town resident? Yes – Proof required. (NYS driver's license) No

If no, please provide the name, address and phone number of a Town of Ballston resident who will sponsor your rental.

Alcohol Use Requested? (BLFDM Park only) Yes No If yes, permit needed (see rules & regulations)

Signature of Renter: _____

Please note: It is the responsibility of the Renter to pick up keys to the facility, if applicable, from the Town Clerk prior to the event. Rental fee, cleaning deposit, and proof of insurance is due at least 2 weeks prior to the event. Carry-in-Carry-out Policy is in effect for all events. Please notify the Town Clerk's Office of any damages or occurrences during your rental or if damage found prior to usage of the facility.

Please sign and return this form along with a \$15 Administrative Fee to:

Town of Ballston Town Clerk
323 Charlton Road
Ballston Spa, NY 12020