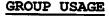
VILLAGE OF WOODRIDGE "KRIEGER PARK" GROUP USE APPLICATION

| GROUP/CAMP/COLONY NAI | ME: |
|---|--|
| CONTACT PERSON: | PHONE: |
| PHYSICAL AND MAILING ADD | RESS: |
| | |
| NUMBER OF CAMPERS OR | GROUP/COLONY MEMBERS: |
| DAY/DATE | ☐ 10:00 AM to 1:00 PM |
| | ☐ 2:00 PM to 5:00 PM |
| | TO KRIEGER PARK: WALKING ate #:) BUS(Bus Co. Name: |
| of Woodridge free and has illness, accident, mischi alcoholic beverages by t PERMITTED* ALL GROUPS US CERTIFICATE OF INSURANCE NAMING THE VILLAGE OF WOO THE POLICY. FAILURE TO E | ssued on the condition that the applicant holds the Village ruless from any and all claims for damage arising out or ief or any other claim resulting from the consumption of the applicant and their guests. *NO ALCOHOLIC BEVERAGE. SING KRIEGER PARK FACILITIES ARE REQUIRED TO PROVIDE IN DEMONSTRATING THAT THEY HAVE LIABILITY INSURANCE, AND DRIDGE AS AN ADDITIONAL INSURED AND CERTIFICATE HOLDER OF PROVIDE THE REQUIRED CERTIFICATE OF INSURANCE WILL RESULT ATION FOR GROUP USE OF KRIEGER PARK. |
| with the group at all tim | there must be a supervising adult (21 years old or older es and that the supervising adult and the Camp/Group will by damages incurred during the group's use of Krieger Park |
| *Group must check in at | Village Hall at 2 Dairyland Road to obtain Park Pass. |
| SIGNATURE OF SUPERVISING ADULT: | DATE: |
| | ************************************** |
| Explanation: | |
| | Date:Village Clerk Signature: |

Village of Woodridge POB 655, 2 Dairyland Rd. Woodridge, NY 12789 845-434-7447 845-434-7855 FAX: 845-434-0916



RESERVATION FORM MUST BE SUBMITTED A MINIMUM OF FIVE (5) DAYS IN ADVANCE OF THE TIME YOU ARE REQUESTING USE OF THE PARK.

YOU MUST BE 21 YEARS OF AGE OR OLDER TO APPLY FOR GROUP USAGE.

Hours of operation are 10:00 AM to 1:00 PM and 2:00 PM to 5:00 PM, Monday thru Friday ONLY. WEEKEND GROUP USE IS PROHIBITED.

Group usage entitles user to occupy playground and field area associated with playground. Your reservation insures no other group will utilize area during your reserved time frame. Please note that families are permitted in the playground area. Reservations pertain to groups only.

GROUP USAGE RATES

| GROUP SIZE | USAGE CHARGE | DEPOSIT REQUIRED | | | | | |
|--------------------------------|-------------------------|---------------------------|--|--|--|--|--|
| 10 AND UNDER | NO CHARGE | NO CHARGE | | | | | |
| 11 - 25 | \$ 25.00 | \$ 25.00 | | | | | |
| 26 - 75 | \$ 75.00 | \$ 75.00 | | | | | |
| 76 - 150 | \$ 150.00 | \$ 150.00 | | | | | |
| 151 - 500 | \$ 250.00 | \$ 250.00 | | | | | |
| OVER 500 - SPECIAL | PERMIT REQUIRED FROM VI | LLAGE BOARD, AND YOU MUST | | | | | |
| PROVIDE INSURANCE CERTIFICATE. | | | | | | | |

| BASEBALL | FIELD | USE | Ş | 25.00/USE |
|----------|-------|-----|---------|-----------|
| | | | . 4. 4. | 4 |

EXCESSIVE NOISE OF ANY KIND WHICH INFRINGES ON THE RIGHTS OF OTHERS, WHO ARE PATRONIZING THE PARK FACILITY, OR THOSE OUTSIDE THE LIMITS OF THE PARK, IS NOT PERMITTED AND CAN RESULT IN TERMINATION OF YOUR EVENT WITH NO REFUNDS. NO AMPLIFIERS, SOUND SYSTEMS, OR LOUD MUSIC IS PERMITTED.

PARK USE FEE \$ _____ BASEBALL FIELD USE FEE \$ _____

DATE PAID: ____ CASH ___ CHECK # ____ RECEIPT # _____

DEPOSIT \$ ____ DATE PAID ___ CASH ___ CHECK # _____

RECEIPT # ____ DATE RETURNED: ____ SIGNED: _____

PROOF OF NUMBER OF CAMPERS/PERSONS ENCLOSED: ____ YES ____NO