



Town of Alden

Park Use Application and Agreement

Rental Location:

Alden Town Park

Robert O. Memorial Park

Please check the type of group/organization:*

Community Youth Group

Community Adult Group

School

Individual

Organization/Individual: _____

Organization Phone: _____

Address: _____

Contact Person Name: _____

Park Area Requested (diamond, field, shelter, etc): _____

Type of activity or event: _____

Total Participants: _____

Day(s) and Date(s) requested: _____

Time requested (from first arrival to last departure): _____

Any special needs or requests for this activity or event: _____

Please list activities you will be doing: _____

For the use of the parks, you must agree to the following:

1. Alcohol, smoking and/or use of tobacco, including vaping and e-cigarettes, is prohibited.
2. Any activity or event with youth under 18 years old, requires the presence of adequate adult supervision at all times.
3. In the event of inclement weather, use of the parks will be dictated by the town whether to close or remain open.
4. Your organization must provide proof of insurance and completed town waivers. **N/A for individual shelter rental.** The Organization must provide a certificate of insurance to the Town of Alden with the Town named as an additional insured in the minimum amount of \$1,000,000 each occurrence and \$3,000,000 aggregate to the Town Clerk at least one (1) week prior to the event.
5. The facilities used will be left in the condition that they were found. If any additional cleaning and/or repairs/damages are necessary, all charges will be the responsibility of the organization/individual.
6. Inflatable entertainment devices of any kind are strictly prohibited.
7. All outside food vendors must obtain Erie County Health Department permits *The same shall be filed with the Town Clerk

Agreement: _____

*** MUST BE A RESIDENT OF ALDEN TOWN/VILLAGE**

Signature: _____

Approved _____

Date: _____