

APPLICATION FOR THE USE OF THE MOUNT UPTON PARK

Contact: Town Clerk
223 Marble Rd
Guilford, NY 13780
(607) 895-9966

Today's Date: _____ Date(s) Requested: _____

Facility Requested: _____ Pavilion _____ Bathrooms _____ Grills _____ Basketball Court
_____ Ball Field _____ Pulling Track _____ Electric _____ Outside Water Access

Other: _____

Name of Organization or Individual: _____

Person in Charge: _____

Mailing Address: _____

Telephone: (Day) _____ (Night) _____

INFORMATION ABOUT INTENDED USE OF THE MOUNT UPTON PARK

Purpose of Use: _____

Time of Use: From: _____ To: _____ ****Desired time to unlock bathrooms**

*****FOR PUBLIC EVENTS: PRIOR TO APPLICATION APPROVAL, APPLICANT MUST MEET WITH PARK COMMITTEE*****

Total Number of Participants Expected: _____ Adults _____ Children

Is an admission fee charged: _____ Yes _____ No

If so, what will the proceeds be used for? _____

FEES for the Use of the Park are **NON-REFUNDABLE** and **DUE** at time of reservation.

Please make checks payable to **Guilford Town Clerk**.

Resident/Non-Resident (Pavilion & bathrooms) \$50.00

Track Event \$160

Public Event (Pavilion, bathroom and field) \$100.00

Track Event with Lights \$200.00

The Town Board May Waive Fees for Programs

MOUNT UPTON PARK RULES

1. No **ALCOHOLIC** beverages
2. Trash/Garbage must be carried out.
3. **No** Recreational Vehicles.
4. **No** Parking on the Ball Field.
5. **Adult supervision** of children and pets is required.
6. Return tables and equipment to where they belong.
7. Responsible for **cleanup** of bathrooms.
8. Responsible for **repair** of damage to fields.
9. All posted rules must be adhered to.
10. All commercial users will provide the Town of Guilford a Certificate of Insurance naming the Town as Additional insured with a minimum of \$1,000,000 per incident/\$3,000,000 per event.

MOUNT UPTON PARK USE AGREEMENT

The undersigned is over 21 years of age and has read the regulations and agrees to comply with them. He/She agrees to be responsible to the municipality for the use and care of the facilities. He/She on behalf of the named organization or individual does hereby covenant and agrees to defend, indemnify and hold harmless the Town of Guilford from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for bodily injury and/or property damage, to the extent possible by law, arising out of or in connection with the actual or proposed use of the Town of Guilford's property and facilities by the organization/individuals.

A credit card copy must be provided and will be kept on record until a satisfactory inspection is reported at the completion of the event. If there are damages or extensive cleaning required the undersigned is responsible and the card on file will be charged.

Signature of the Organization Representative: _____

In the event of an emergency or an issue with the park please contact:
Ms. Marlene Utter (607) 764-8385 or Ms. Gilda Ward (607) 764-8303 cell (607) 244-5528
or Supervisor George Seneck (607) 895-6282