

Revocable Permit for Use of Town Park Property

The undersigned requests permission for _____ to
League/Team/Organization Name
use _____, on the date/dates listed _____
Field Requested
_____ during the following time/times
_____.

**** (Please attach separate/additional sheet/s with scheduled dates and times your organization will need this facility.) ****

Organization _____

Official Representative in charge _____

Representative's Address _____

Telephone # Home _____ Business _____ Cell _____

The undersigned requests permission to use the above mentioned location and agrees that, unless agreed otherwise with the Town Board, all events applied for will be free and open to the public. If an admission fee is charged, it must be understood that all money except expenses allowed by the Town Board shall be expended at the direction of the Town Board for the furtherance of Recreation in the Town of Mount Hope. If there is to be a definite charge for any event a fee may be required. Such fees will be determined by the Town Board in conjunction with the Parks and Recreation Coordinator. Organized teams and leagues are required to submit a Certificate of Insurance with the Town of Mount Hope named as an "ADDITIONAL INSURED" (Minimum Coverage = \$1,000,000 Bodily Injury & Property Damage Liability). In addition, a financial report MUST BE submitted to the Town Board at the beginning of each year by all for profit Leagues/Organizations. ****Non-profit organizations are EXEMPT from this financial disclosure requirement.****

Travel Team Fees:

A seasonal fee will be determined by the Town Board in conjunction with the Parks and Receptions Coordinator pursuant to the times and dates requested. (i.e.: Less than 5 times per season \$150, 5-10 times per season \$250.) ****Usage fees may be waived by the Town Board based on the Team/League/Organizations involvement in the up keep of the fields. ****

This is a REVOCABLE PERMIT subject to change if necessary. Any event IS NOT EXEMPT from the Town of Mount Hope "Ordinance Concerning Loud and Unnecessary Noise" and the "Town of Mount Hope Parkland Regulations" without the written permission of the Town Board.

The undersigned agrees to all conditions listed on both pages 1 & 2.

_____ **Official Representative** _____ **Official Title** _____ **Date**

.....
All 5 Town Board Members

Permit approved by _____, _____, _____,

_____, _____, _____ **Date**

Revocable Permit for Use of Town Park Property

January

Re: Revocable Permit for Use of Town Park Property

Dear Leagues & Teams/Travel Teams;

Enclosed is a permit to use park property in the Town of Mount Hope. Please provide your personal information and fill in the dates and hours you are requesting for the use of the facility. Be aware of any remarks written on the bottom of the permit to prevent problems. Please fill in and sign all forms where necessary and mail back to the above address. Please make a copy for your records.

The Town of Mount Hope will not approve your permit until we receive a Certificate of Insurance naming the Town of Mount Hope as an Additional Insured.

Travel team organizations must additionally supply; team rosters showing that Town of Mount Hope Residents are current league participants, their current year's financial statement and pay the field maintenance fee – if any is imposed. Only after receiving these items will the Parks and Recreations Coordinator schedule your request for ball fields around our local youth and adult leagues.

We are working hard to accommodate all, however, there may at times be a conflict – we all must work together and be flexible to keep as many children/adults involved in **POSITIVE** activities. Let us all be perfect role models for our youth and show them the real meaning of **TEAMWORK**.

HERE ARE A FEW REMINDERS –

- **NO ONE UNDER 18 MAY WORK ANY GRILL, FRIER OR OVEN/STOVE IN CONCESSION STANDS.** (NY State Law)
- **ALL KIDS WORKING AT CONCESSION STANDS SHOULD HAVE VALID WORKING PAPERS.** (NY State Law)
- **NO WORK IS TO BE DONE ON ANY FIELD OR FACILITY WITHOUT THE EXPRESSED PERMISSION OF THE TOWN BOARD or PARKS AND RECREATIONS COORDINATOR.**
- **NO NEW EQUIPMENT OR FIXTURES SHOULD BE PLACED ON PARK PROPERTY WITHOUT THE EXPRESSED PERMISSION OF THE TOWN BOARD or PARKS AND RECREATIONS COORDINATOR.**
- **ANY EXCESS REFUSE GENERATED BY YOUR EVENT – THAT OVERFLOWS THE TOWN'S CANS – MUST BE REMOVED BY YOUR ORGANIZATION THE SAME DAY AS YOUR EVENT!!!**
- **NO ALCOHOLIC BEVERAGES ARE ALLOWED ON PARK GROUNDS**
- **NO SMOKING ON PARK GROUNDS**

FINANCIAL REPORT

Organized leagues are required to submit a financial report to the Town Board at the beginning of each year, no later than March 30th or within 30 days of receiving this paperwork from the Parks and Recreations Coordinator. The permit for the season cannot be issued until the report is completed and submitted. Leave items that do not apply blank; and use attachments, if necessary.

League/Organization Name: _____

Dates Reported: From: _____ To: _____

A. Income –

1. Registration Fees _____ \$ _____

2. Sale of Refreshments _____ \$ _____

3. Fundraisers (Itemize)

a. _____ \$ _____

b. _____ \$ _____

c. _____ \$ _____

4. League/Team Sponsorships _____ \$ _____

5. Donations _____ \$ _____

6. Other Income (Itemize)

a. _____ \$ _____

b. _____ \$ _____

Total Income \$ _____



FINANCIAL REPORT

B. Expenses –

- 1. Insurance _____ \$ _____
 - 2. Uniforms _____ \$ _____
 - 3. Equipment _____ \$ _____
 - 4. Umpires/Referees _____ \$ _____
 - 5. Field/Facility Improvements _____ \$ _____
 - 6. Other Expenses (Itemize)
 - a. Telephone _____ \$ _____
 - b. Advertising _____ \$ _____
 - c. _____ \$ _____
 - d. _____ \$ _____
 - e. _____ \$ _____
- Total Expenses** \$ _____

C. Surplus Deficit

\$ _____

The undersigned is a principal officer or director of the above named league/organization and certifies that, to the best of his/her knowledge, the information contained in this report and attachments (if any) is accurate and based on information available at the end of last season; and there are no misstatements or misrepresentations in the information submitted herein or as a supplement to this financial report.

Signature: _____ Date: _____

Name: _____ Title: _____

Please Print

Contact Information

Please provide us with the following information:

All Officers:

1)	_____	_____
	Title	Name
	_____	_____
	Home Phone & Cell phone	Home Address
2)	_____	_____
	Title	Name
	_____	_____
	Home Phone & Cell phone	Home Address
3)	_____	_____
	Title	Name
	_____	_____
	Home Phone & Cell phone	Home Address
4)	_____	_____
	Title	Name
	_____	_____
	Home Phone & Cell phone	Home Address
5)	_____	_____
	Title	Name
	_____	_____
	Home Phone & Cell phone	Home Address
6)	_____	_____
	Title	Name
	_____	_____
	Home Phone & Cell phone	Home Address
7)	_____	_____
	Title	Name
	_____	_____
	Home Phone & Cell phone	Home Address