



Incorporated
Village of Port Jefferson

RECREATION AND PARKS
101-A East Broadway
Port Jefferson, NY 11777

(631) 802-2160

GENERAL FACILITY USE FORM

APPLICANT NAME _____

ORGANIZATION _____

ADDRESS _____

DAY TIME PHONE _____ ALTERNATE PHONE _____

FAX # _____ EMAIL _____

REQUESTED FACILITY: East Beach ___ West Beach ___ Ballfield ___ Other _____

DATE REQUESTED _____ TIME: BEGINNING _____ ENDING _____

OF PARTICIPANTS _____ (%) VILLAGE RESIDENTS _____

PURPOSE OF EVENT _____

The undersigned agrees that the Incorporated Village of Port Jefferson, its agents, officers, elected and appointed officials, and employees shall not be liable for any claims, injuries, damages, or expenses sustained by the undersigned as a result of use of the existing facility. This release from liability shall apply to all claims, injuries, damages or expenses regardless of fault of the Incorporated Village of Port Jefferson, its agents, officers, elected and appointed officials, and employees. This release is made with the knowledge that the Incorporated Village of Port Jefferson provides no insurance to cover any claims, damages, or expenses which may result from the use of said facility.

Signature of Applicant/Representative Responsible for Event

Date

OFFICE USE ONLY

APPROVED: _____ DISAPPROVED: _____ DATE: _____

COMMENTS: _____

RECREATION DIRECTOR: _____