

SHOHOLA TOWNSHIP

159 Twin Lakes Road, Shohola, PA 18458
(570) 559-7394 (570) 559-7523 (fax)

PARK EVENT APPLICATION

(For Office Use Only)

<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Date of Decision _____	Reason for Denial (if denied) _____
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APPLICANT INFORMATION

1. Full name and address of Applicant (include the name and phone number of a person in charge who shall be available to contact during the event):

2. Date Requested: _____ Time: _____

Reservation for Pavilion _____ Ballfield: _____

3. Brief description of event: _____

4. Expected attendance: _____

5. Is a need for traffic control anticipated: Yes No

6. Names and addresses of all vendors conducting sales at event (attach additional sheets if necessary):

7. Insurance information: Attach Certificate of Insurance naming Shohola Township as additional insured. This form can be attached or faxed to Shohola Township at 570-559-7523.

By affixing my signature below, I certify that I read and am familiar with Shohola Township Ordinance No. 73. I understand and agree to abide by the rules for use of the park and pavilion, and will report to the Township any violation of which I personally witness or become aware.

Dated: _____

Print name: _____