**LAFAYETTE FACILITIES USAGE RESERVATION**

**□ Resident □ Non-Resident /// □ Business □ Profit □ Non-Profit**

**□ Community Center □ PAVILLION 1 (Near Playground) □ PAVILLION 2 (Near Optimist Ball Fields)**

Reserved For:

Date(s):

Time(s):

Name of Applicant (must 21 yrs or older):

Address:

Email Address:

Telephone: # of Attendees:

Deposit Amount: $ Form: Cash/ Check # Date:

Fee Amount: $ Form: Cash / Check # Date:

**□ Fee Waived by Town Board**

Approved By: Date:

**PERMIT HOLDER’S SIGNATURE**

**Permit Holder’s Signature** (signature MUST BE SAME AS THE NAME listed on Reservation Form)

Person listed on this form and signing below is representing the above names group and is legally responsible for any and all actions of the group members while they are on the town property. This person will be held financially responsible for any and all damages to the property caused by a member of his/her group. This person is responsible for his/her group’s adherence to all policies/guidelines including those pertaining to alcohol use.

**I hereby acknowledge that I have read, understand and agree to comply with the policies and guidelines for the Town of LaFayette Park usage. I further verify that I am 21 years or older and assume all responsibility for the action of those attending under my supervision**.

Name: Date:

Key # picked up on (date)

Key # returned on (date)

**PLEASE CHECK ONE BOX**

□ PLEASE SHRED MY DEPOSIT CHECK□ I WILL PICK UP MY DEPOSIT

□ DEPOSIT WAS PICKED UP ON BY .

 (Signature)