

Kenneth D. Runion
Supervisor

Dennis Moore
Director of
Parks and Recreation

**TOWN OF GUILDERLAND
PARKS AND RECREATION DEPARTMENT**

181 Route 146
Altamont, NY 12009
Ph. 456-3150 Fax 456-3156
www.townofguilderland.org

REQUEST FOR FIELD PERMIT

NAME OF ORGANIZATION: _____

EVENT OR PURPOSE OF FIELD USE: _____

LOCATION OF FIELDS: _____

FIELD(S) REQUESTED: _____ DAY(S): _____

TIME: _____ DATE(S): _____

NUMBER OF PARTICIPANTS: _____

RENTAL FEE: \$35/per field; + \$55 for Use of Lights

FIELD DEPOSIT (\$100 PER FIELD): \$ _____ MAKE CHECK PAYABLE TO "TOWN OF GUILDERLAND"

SPECIAL REQUIREMENTS (Equipment, Supplies, etc.): _____

PERSON IN CHARGE:

NAME: _____ ADDRESS: _____

LICENSE PLATE # _____ E-MAIL ADDRESS: _____

PHONE #: (H) _____ (W) _____ (C) _____

OFFICE USE ONLY

Date Request Received:

Date Approved:

Approved By:

Insurance Certificate Received:

Expiration Date:

Received By:

Field Deposit for _____ Fields (\$100 per Field): \$ _____ Date Received: _____

For more information, please contact:
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E-mail: moored@townofguilderland.org