

**TOWN OF CAMBRIA TOWN PARK  
SPECIAL EVENT USE APPLICATION FORM**

*(REQUIRED CERTIFICATE OF INSURANCE MUST BE FURNISHED WITH APPLICATION)*

Today's Date: \_\_\_\_\_ Date(s) Requested: \_\_\_\_\_ Time: \_\_\_\_\_ to \_\_\_\_\_

Date(s) Requested: \_\_\_\_\_ Time: \_\_\_\_\_ to \_\_\_\_\_

Shelter/Area Requested: \_\_\_\_\_

**INFORMATION ABOUT YOUR GROUP**

Name of Applicant Organization or Individual: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ (Fax) \_\_\_\_\_

Name of Event Manager (Contact Individuals, **please list two**): \_\_\_\_\_

Address of Primary Contact Person: \_\_\_\_\_

Telephone Number (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ (Emergency) \_\_\_\_\_

Address of Secondary Contact Person: \_\_\_\_\_

Telephone Number (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ (Emergency) \_\_\_\_\_

**INFORMATION ABOUT INTENDED USE OF TOWN PARK FACILITIES**

Event Name: \_\_\_\_\_

Event Purpose & Description: \_\_\_\_\_

Proposed Events/Entertainment/Activities: \_\_\_\_\_

\_\_\_\_\_

Expected size of Audience: \_\_\_\_\_ Admission Fee Charged? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If Yes, Amount \$ \_\_\_\_\_

Proposed Use of Proceeds From Event: \_\_\_\_\_

Will Alcohol/Beverages/Food be served? (please specify): \_\_\_\_\_

Please list all Vendors being used for Event: \_\_\_\_\_

**This application is being made with the understanding that the applicant has read, acknowledges and understands the Town of Cambria Town Park Rules and Regulations and will comply with same.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

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***TO BE COMPLETED BY PARK DIRECTOR***

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Reason \_\_\_\_\_

Park Director Signature \_\_\_\_\_ Date \_\_\_\_\_

Amount Paid \_\_\_\_\_ Date Paid \_\_\_\_\_ Received by \_\_\_\_\_