

**THE VILLAGE OF DOBBS FERRY**  
Recreation Department  
112 Main Street, Dobbs Ferry New York 10522



**APPLICATION FOR USE OF WATERFRONT PARK**

Date of Application: \_\_\_\_\_ Date(s) Requested: \_\_\_\_\_

Time Requested: \_\_\_\_\_ to \_\_\_\_\_ Purpose of Use: \_\_\_\_\_

Area requested: Picnic tables: \_\_\_\_\_ Stage: \_\_\_\_\_ Other (please explain): \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

**Fees: (for 4 hour time slot)**

Residents: \$100.00 \_\_\_\_\_

Non- Residents: \$250.00 \_\_\_\_\_

Stage area (extra fee) \$50.00 \_\_\_\_\_

**Any applications submitted less than one month  
in advance of the event date will incur an  
additional \$50 administration fee.**

Total number of participants expected: \_\_\_\_\_

Do you plan to have?

Music: \_\_\_\_\_ Tables/chairs: \_\_\_\_\_ Tents: \_\_\_\_\_

If yes, please provide additional details below.

Additional Information: \_\_\_\_\_

*Please note: Waterfront Park is a drug, tobacco and alcohol free park.*

**Agreement**

The undersigned is over 21 years of age and has read this form and attached regulations and agrees to comply with them. I do hereby covenant and agree to defend, indemnify and hold harmless the Village of Dobbs Ferry from bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of the Village of Dobbs Ferry property, facilities or services.

Signature/Organization's Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Subject to cancellation in the event of conflict with Village activities.

Date received: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Fee paid: \_\_\_\_\_ Approved: \_\_\_\_\_ Denied \_\_\_\_\_

**Overtime Costs**

Police: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_

DPW: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_

Bldg: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_