

Roeliff Jansen Park Wedding/Event Permit

roejanpark@fairpoint.net

Type of Event: _____

Date of Event: _____

Hours of Event: _____

Responsible for Event: (Names): _____

Address: _____ City: _____

Phone #: _____ Email: _____

Insurance Carrier (if different than above)

Name: _____

Address: _____ City: _____

Phone #: _____ Email: _____

Other Pertinent Contact Person(s): _____

Phone #: _____

EVENT INFORMATION

Number of Guests : _____

Ceremony Location (if different than Hilltop Barn): _____

Catering Company: _____

Contact Person(s): _____ Phone #: _____

Party Rental Company: _____

Contact Person(s): _____ Phone #: _____

Portable Toilet Rental Company: _____

Contact Person(s): _____ Phone #: _____

Other Information/Notes/Special Requests:

Deposit: \$500 _____ Check #: _____ Date: _____

Fees Due: _____ Check #: _____ Date: _____

Roeliff Jansen Park Event Permit

I/We hereby agree to the Roeliff Jansen Park Event Policies and Guidelines that are attached with this permit. I/We agree to comply with the rules and regulations of the NYS Parks & Recreation, Town of Hillsdale and Historic Preservation. I/We have or will agree to pay the remaining balance due one month prior to the event and have all the required agreements and permits requested.

Name(s): _____

Signature(s): _____

Date: _____

RJP Representative Signature: _____