

VILLAGE OF RAVENA MOSHER PARK
PAVILION RESERVATION

15 MOUNTAIN ROAD
RAVENA, N.Y. 12143
756-8933

\$50.00 DEPOSIT REQUIRED TO CONFIRM RESERVATION

NAME OF APPLICANT _____

ADDRESS _____

PHONE _____

DATE REQUESTED _____ PAVILION NUMBER _____

HOURS _____ NUMBER OF PERSONS EXPECTED _____

APPLICANT HEREBY AGREES TO ABIDE BY ALL RULES AND REGULATIONS OF THE VILLAGE OF RAVENA, INCLUDING ANY ADDITIONAL REGULATIONS AS LISTED BELOW, FOR THE USE OF MOSHER PARK.

- NO VEHICLES ON THE LAWN FOR ANY REASON, AT ANY TIME. (THIS INCLUDES FOR LOADING OR UNLOADING VEHICLES)
- APPLICANT IS RESPONSIBLE FOR THE CLEAN UP OF THE AREA AT THE END OF THE EVENT.
- APPLICANT IS RESPONSIBLE FOR THE CONDUCT OF THEIR GUESTS AND ANY DAMAGE THEY MAY CAUSE.
- IF YOU NEED TO CANCEL THIS RESERVATION YOU MUST DO SO AT LEAST 7 DAYS PRIOR TO THE DATE OF YOUR EVENT.
- ALCOHOLIC BEVERAGES ARE NOT PERMITTED IN MOSHER PARK WITHOUT THE APPROPRIATE PERMIT ISSUED BY THE TOWN.

FAILURE TO COMPLY WITH ANY OF THE ABOVE REGULATIONS WILL RESULT IN THE AUTOMATIC FORFEITURE OF YOUR \$50.00 DEPOSIT!!!

***FEE FOR PARK USE: \$25.00 NON-REFUNDABLE FOR TOWN RESIDENTS (NON-VILLAGE) ***

DATE OF APPLICATION

SIGNATURE OF APPLICANT

APPROVED

DISAPPROVED

SIGNATURE OF VILLAGE OFFICIAL

15 MOUNTAIN ROAD
RAVENA, NY 12143

VILLAGE OF RAVENA

TEL. (518) 756-8233
FAX (518) 756-3363
TDD # 1-800-662-1220

CLERK-TREASURER
SUSAN M. KING

**DEPUTY CLERK-
TREASURER**
KRISTINE M. BIERNACKI

VILLAGE CLERK
GABBY AMBROSE



TRUSTEES
CAITLIN APPLEBY
JOSEPH A. GANLEY
LINDA C. MULLER
NANCY J. WARNER

MAYOR

WILLIAM J. MISURACA, JR.

COMMUNITY EVENT APPLICATION

NAME:

ADDRESS:

PHONE#:

ORGANIZATION NAME & ADDRESS:

DATE OF EVENT:

TIME OF EVENT:

PLACE OF EVENT:

PURPOSE OF EVENT:

NUMBER OF PEOPLE EXPECTED TO ATTEND:

TYPES & AMOUNT OF ALCOHOL (USE SEPARATE SHEET IF NEEDED):

NAME & D.O.B. OF SECURITY PERSONNEL (USE SEPARATE SHEET IF NEEDED):

PLEASE ATTACH DIAGRAM OF AREA OF EVENT.

PLEASE COMPLETE AND RETURN TO THE TOWN OF COEYMANS CHIEF OF POLICE.

An approved park use permit must accompany this application (available at Town Clerk's or Village Office as appropriate)

The following person requests permission to possess and distribute an alcoholic beverage at the location noted:

Name: _____

Date of Birth: _____

Address: _____

Phone Number: _____

Signature: _____

Location: _____
Date of Event: _____
Number Attending: _____
Type of Beverage: <input type="checkbox"/> - Beer
<input type="checkbox"/> - Wine
<input type="checkbox"/> - Liquor

Your signature indicates that you will obey the rules of the park as noted below, that you accept responsibility for the condition of the park and pavilion, and that you will responsibly serve alcoholic beverages to the persons attending the event, in compliance with park rules and law. Violations of these rules will result in the revocation of your permit, permission to use the park for you and all guests and possible criminal charges.

Deliver this application to the Village Office at 15 Mountain Road, Ravena. You will be notified by telephone when an approved copy is available to be picked up.

RULES

- Do not litter.
- Obey posted speed limits and parking regulations.
- Drive on roadways only.
- No open fires - cookers are provided.
- No alcoholic beverages without Police permit.
- Parks open at 6:00 AM and close at dark.
- No ATV's in any park areas.
- Post this permit, you will be checked by Police Patrols.

- Approved

- Disapproved

Comments: _____

Approved by: _____

The approval of this permit in no way allows a violation of the NYS Alcohol Beverage Control Law or any other ordinance, statute, law or rule governing the possessions or consumption of any alcoholic beverage.