



APPLICATION FOR USE OF PINE KNOLL AREA



Name of Organization: _____ (If applicable)

Address: _____ State: _____ Zip: _____

Position: _____

Person in Charge of Event: _____ *(Required to be in attendance at the entire event.)*

Address: _____

Cell Phone: _____ Email: _____

Number of People Expected to Attend: _____

Date(s): _____

Area Requested: (Circle all that apply)

Birch Hall Pine Lodge Pool Athletic Fields

Time of event: Start: _____ Finish: _____ Pool Access: Start: _____ Finish: _____

Description of Activity: _____

Add'l Requests: (Fees may apply) _____

Will an admission fee or collection of dues be REQUIRED of those attending? YES NO

If YES, explain the reason: _____

***Requested dates cannot be held until a payment is made in full and the deposit secured.
All reservations will need to provide a credit card or a separate \$250 check for a damage deposit.
Make checks payable to the Town of East Longmeadow.***

By signing this registration, you and your group agree to follow the rules governing Pine Knoll use.

Signature: _____

Printed Name: _____

Damage Deposit Information:

Credit Card: _____ Expiration: _____ CVC: _____

Check #: _____ Bank: _____ Mastercard, Visa or Discover

OFFICE USE ONLY

Available on the requested dates? YES NO Notes: _____

Building Rental Fee \$ _____

Equipment Rental Fee \$ _____

Personnel Service Fee \$ _____

Additional Requests \$ _____

Total \$ _____

Director's Signature of Approval: _____