

**APPLICATION FOR USE OF COMMUNITY FACILITIES**  
**Town of Cobleskill**  
**PO Box 327**  
**Cobleskill, NY 12043**

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

Facility Requested: \_\_\_\_\_

**INFORMATION ABOUT YOUR GROUP**

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

Time: \_\_\_\_\_ to \_\_\_\_\_. Your supervisor in charge: \_\_\_\_\_

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

Telephone: (Day) \_\_\_\_\_ (Night) \_\_\_\_\_

**INFORMATION ABOUT YOUR INTENDED USE OF MUNICIPAL FACILITIES**

Purpose of Use: \_\_\_\_\_

\_\_\_\_\_

Total Participants Expected: \_\_\_\_\_ Adults: \_\_\_\_\_ Children: \_\_\_\_\_

Is material or equipment required from municipality? Yes \_\_\_\_\_ No \_\_\_\_\_

If needed, state what types and for what purpose: \_\_\_\_\_

\_\_\_\_\_

Residents (Number): \_\_\_\_\_ Non-Residents (Number): \_\_\_\_\_

Is an admission fee charged? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, what will proceeds be used for? \_\_\_\_\_

**HOLD HARMLESS AGREEMENT**

FACILITY USER does hereby covenant and agree to defend, indemnify and hold harmless the Town of Cobleskill from and against any and all liability, loss, damages, claims, or actions (including costs and attorneys fees) for 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 Town of Cobleskill property, facilities and/or services.

**AGREEMENT**

The undersigned is over 21 years of age and has read this form and attached regulations and agrees to comply with them. He/she agrees to be responsible to the municipality for the use and care of the facilities. He/she, on behalf of \_\_\_\_\_ does hereby covenant and agree to defend, indemnify and hold harmless the Town of Cobleskill from and against any and all liability, loss, damages, claims, or actions (including costs and attorneys fees) for 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 Town of Cobleskill's property, facilities and/or services by \_\_\_\_\_.

\_\_\_\_\_  
Signature of Organization's  
Representative

Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_

\_\_\_\_\_  
Signature - Town of Cobleskill

\_\_\_\_\_  
Approval Date

**READ ATTACHED REQUIREMENTS AND RETURN APPLICATION AND INSURANCE BINDER TO:**  
**Town of Cobleskill, PO Box 327, Cobleskill, NY 12043**

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**FACILITY USE REQUIREMENTS**

The use of all Recreational and Parks facilities shall be subject to the approval and rules of the Town Park Committee administered by the Town Park President.

1. Organizations wishing to use municipal facilities shall first apply to the Town Park President on the prescribed form. The President or his/her designee has final authority on approval.
2. In the event of inclement weather, the President or his designee has the final authority on whether facilities are usable.
3. Intoxicants shall not be brought onto municipal facilities at any time.
4. All posted rules must be adhered to.
5. Profanity, objectionable language, disorderly acts or illegal activities of any kind are absolutely prohibited, and those violating this prohibition will be ejected from the premises.
6. Any damage to municipal facilities shall be promptly repaired at the user's expense. No exceptions.
7. Organizations using the facilities must clean-up afterwards.
8. Permits may be revoked at any time.
9. Any organization with youth under 18 years old requires the presence of adequate adult supervision at all times.
10. The appropriate authority must be contacted in the event of an emergency.
11. When required, users must provide the following insurance prior to using facilities.

**FAILURE TO DO SO PRIOR TO USE WILL RESULT IN REVOCATION OF YOUR PERMIT:**

**Commercial Users:**

- A. The user hereby agrees to effectuate the naming of the municipality as the Town of Cobleskill, an unrestricted additional insured on the user's policy.
- B. The policy naming the municipality as an additional insured shall:
  - be an insurance policy from an AM. Best rated "secured" New York State licensed insurer;
  - contain a 30 day notice of cancellation;
    - state that the organization's coverage shall be primary coverage for the Municipality, its Board, employees and volunteers; and
    - additional insured status shall be provided with ISO endorsement CG 2026 or its equivalent.
- C. The user agrees to indemnify the municipality for any applicable deductibles.
- D. Enclose a copy of the endorsement providing additional insured status.
- E. **Required Insurance:**
  - Commercial General Liability Insurance**  
\$1,000,000 per occurrence/ \$2,000,000 aggregate.
- F. User acknowledges that failure to obtain such insurance on behalf of the municipality constitutes a material breach of contract and subjects it to liability for damages, indemnification and all other legal remedies available to the municipality. The user is to provide the municipality with a certificate of insurance, evidencing the above requirements have been met. The failure of the municipality to object to the contents of the certificate or the absence of it shall not be deemed a waiver of any and all rights held by the municipality.

**Individuals:**

Required Insurance:

•**Homeowners Insurance**

Section Two – Liability: \$100,000 limit of liability. Policy shall not exclude the off-premises activities of the insured.