PLUMSTEAD

5186 Stump Rd Pipersville, PA 18947



TOWNSHIP

215-766-8914 FAX - 215-766-9831

APPLICATION FOR USE OF TOWNSHIP FACILITY

Date(s) Requested	Day(s) of	Week	Time:	to
Approximate Attendance _				
Name & Address of Individ	dual, Group Organization:			
	Making Application:			
	r: E			
Purpose of Use of Facility:				
********	*********	********	******	******
	FEE SCHEDULE PER F	RESOLUTION 2009-04		
	Profit Organizations Non Profit Organizations			
	Note: Fee must be paid in a	dvance		
	FEE CHARGED	DATE RECEIV	ED	
*******	********	*******	*****	*****

Granting permission to use Township facility does not in any way constitute an endorsement of the individuals or organization's policies or beliefs by the Township Board of Supervisors. The Township reserves the right to reject any and all applications for the use of Township facility.

I have read and accepted the attacto see they are carried out and add		for use of Township facility and will be re	sponsible
	checks for all employees	_ (name of organization) has fully compliced Pa. C.S. § 6301 et seq., having obtained and volunteers who have control over and volunteers.	
SIGNATURE OF RENTER		DATE	
RETURN COMPLETED APPL	LICATION AND RELE	ASE FORM TO:	
Plumstead Township, 5186 Stum	p Road, Pipersville, PA 1	8947	
Telephone: (215) 766-8914 Fax:	(215) 766-9831		
*********	********	***********	******
APPLICATION STATUS:	APPROVED	DENIED	
BY:	DATE:		
APPLICANT NOTIFIED: PH	ONE MAIL I	N PERSON FAX E-MAIL	
PUBLIC ROOM ASSIGNED:			
	: * * * * * * * * * * * * * * * * * * *	******	****

RELEASE FORM

KNOW ALL MEN BY THESE PRESENTS THAT, INTENDING TO BE LEGALLY BOUND HEREBY,

(Name o	f individual, group or organization)	
officers, agents, employees, and contracted damage, expense, actions, cause of action, the use, occupation or enjoyment by	the Township of Plumstead, its supervisors, direct ors (the "Township"), from and against any and all suits, claims or judgments arising from, resulting from of reaction of reactions.	liability, loss,
	owned or occupied or leased or held by the Towr shall, at its own cost and expense, defend any a	- '
	ip, either alone or in conjunction with others, upon an fy, pay, and discharge any and all judgments that ma uit(s).	
	(Name of individual, group or organization)	-
	(Signature or Individual or Authorized Agent)	
	(Date)	-

This Release Form must be signed and submitted along with the Application for Use for Meeting Room

RULES AND REGULATIONS FOR USE OF TOWNSHIP BUILDING MEETING FACILITIES

Township meetings, programs and activities have priority over any other use scheduled. You will be notified of any conflict and cancellation of use of public room. A Township emergency will displace a group immediately and without notice.

Facilities/public rooms are available between the hours of 9:00 am to 9:00 pm Monday through Friday; Saturday and Sunday, 10:00 am to 6:00 pm (in case of snow or ice on weekends; facility use must be canceled).

Limited parking space is available in the Township parking lot.

Users may provide and operate their own audio, video or related equipment.

It is the responsibility of each individual, group or organization using the public room to rearrange the chairs, tables etc. after use. All lights must be turned off and debris, other than that which can be placed into the wastebasket, must be removed.

Governmental agencies are exempt from payment of fees.

The following are not permitted:

Printed Name

- NO food and/or drinks are allowed on the wood table
- NO smoking, alcohol consumption
- NO food preparation or consumption
- NO pets, unless required as an aid to disabled individual

Non-Emergency Police Dispatch Phone Number (215) 766-8740.

Signature: By signing below, you acknowledge that you have regulations set forth by Plumstead Township.	read, understand and accept in its entirety the rules
Signature	Date

and