



# City of New Haven

## Department of Parks, Recreation & Trees

720 Edgewood Avenue, New Haven, CT 06515 Tel. (203) 946-8020 Fax (203) 946-8024

John DeStefano, Jr., Mayor

Robert D. Levine, Director



### PAVILION REQUEST

**\*Please complete all information or your application will not be accepted\*  
Please type or print clearly.**

**Application Date:** \_\_\_\_\_ **Reservation#:** \_\_\_\_\_

#### -APPLICANT INFORMATION-

**Organization:** \_\_\_\_\_

**Applicant's Name/Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home#:** \_\_\_\_\_ **Work#:** \_\_\_\_\_ **Cell#:** \_\_\_\_\_

**Name of Park:** \_\_\_\_\_ **Specific Location:** \_\_\_\_\_

**Activity Planned:** \_\_\_\_\_ **Estimated Attendance:** \_\_\_\_\_

**Date(s) of Event:** \_\_\_\_\_ **Time(s):** \_\_\_\_\_ **AM/PM to** \_\_\_\_\_ **AM/PM**

**Day(s) of the week:** \_\_\_\_\_

**Caterer's Name:** \_\_\_\_\_ **Phone#:** \_\_\_\_\_

**Permission Request:** \_\_\_\_\_

**RESIDENT FEE: \$50.00**

**NON-RESIDENT FEE: \$100.00**

**MUST SHOW ID**

**\*Resident Parking Pass - No Charge (Lighthouse Only)**

**\*Non-Resident Parking Fee: \$10.00/Day Non-Resident Season Parking Pass: \$50.00**

**\*IMPORTANT: A non-refundable application fee is due and payable at the time the application is submitted.  
Cash, check/money order made payable to TREASURER, CITY OF NEW HAVEN.**

**\*PLEASE READ THE FOLLOWING CAREFULLY & SIGN\***

The applicant agrees to be bound by the rules and regulations of the Parks Department governing its use and by the Ordinances of the City of New Haven and Regulations of the New Haven Board of Park Commissioners. The applicant will pay the fees for labor and/or rental of equipment provided by the Parks Department in certain instances that have been identified on this application and the information sheet. In addition, the applicant will pay fees for any additional labor not stated but provided by the Parks Department as a result of the applicant's activity. The applicant will be required to pay the estimated costs associated with this event prior to the actual park permit being issued. The balance must be paid within TEN WORKING DAYS after being billed. Any balance not paid within the 10 days will automatically cancel the event. Certified checks or Money Orders must be made payable to TREASURER, CITY OF NEW HAVEN. Cash will not be accepted.

On \_\_\_\_\_ (date), the undersigned applicant has inspected the site where the event will occur and is satisfied with and accepts the site in its existing condition and hereby agrees to indemnify, defend and hold harmless the City of New Haven and the New Haven Board of Park Commissioners and their employees, officers and agents from and against any and all claims, losses, suits, actions, demands, fines, fees, judgments, damages and cost arising out of or in any way connected with the use of the undersigned of the City of New Haven facility known as \_\_\_\_\_, on the date(s) of the permitted event.

Upon reviewing all information on this application, the Parks Director and/or Police Chief may require Park's staff and/or Police to be present at this event. The undersigned permit holder agrees to pay for all city services directly associated with this event.

**\*\* In applying for this park permit, the applicant shall agree that no intoxicating liquors shall be sold, distributed free or otherwise made available in connection with the use of such permit.**

No Amplified Music and Music Low as not to disturb other park patrons.

Any special concerns and/or considerations with regard to the above event must be made by Contacting the Director of the Department of Parks, Recreation & Trees at (203) 946-8027.

By: \_\_\_\_\_  
Name of Organization or Trade Name

\_\_\_\_\_  
Signature  
For Personal Liability under the following foregoing  
Indemnification Paragraph

Its: \_\_\_\_\_  
Position/Title

Fee with application: \$ \_\_\_\_\_

Check/Money Order#: \_\_\_\_\_

Insurance certificate required? Yes\_\_\_ / No\_\_\_