

VILLAGE OF WASHINGTONVILLE FACILITY USE REQUEST FORM

All requests for Facility Use must be submitted not less than 4 weeks prior to the event. You will be notified of the approval or denial of your request via email and/or phone. If you have questions, please call 845-496-3221.

Group/Organization:			
Type of Activity/Event:			
Contact Name:			
Mailing Address:			
Phone:		_ Cell:	
Email:		_	
Select Park/Location	Requested for Even	t:	
L. Vern Allen Park	Memorial Park	Municipal Lot (29 W. Main St.)	
Woodfield Park	Village Hall		
Date(s) Requested:			

Time(s) Requested:	
(INCLUDE TIME NEEDED TO SET UP)	

Please attach a copy of your Certificate of Liability Insurance with the Certificate Holder listed as follows.

Village of Washingtonville 9 Fairlawn Drive, Washingtonville, NY 10992

Documents can be mailed/hand delivered to the above address or emailed to Village Clerk Christine Shenkman at **Christine@washingtonville-ny.gov**

OFFICE USE ONLY

Date Received: ______ Received By: _____ Certificate of Liability Insurance Included: Yes _____ Copy of Form Returned to Applicant: Yes _____ Returned Application to Village Clerk: Yes _____

Revised Date: August 5, 2024