



**Insurance**

Name of Insurance Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Phone: \_\_\_\_\_

**Schedule**

PREFERRED SCHEDULE							
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
START TIME							
END TIME							

ALTERNATIVE AVAILABILITY							
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
START TIME							
END TIME							

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

NUMBER OF DAYS REQUESTED PER WEEK: \_\_\_\_\_ One \_\_\_\_\_ Two \_\_\_\_\_ Three \_\_\_\_\_ Four

**PART THREE: SIGNATURE**

I, \_\_\_\_\_ (PRINT NAME), hereby certify that the facts set forth on this application are true and correct to the best of my knowledge. I understand that the submission of false or misleading information is grounds for legal action. In signing this application, I hereby certify that I have read and agree to the Bethel Township Park Rules and Regulations as detailed in the Bethel Township Code and this application. I understand that violation of the Bethel Township Rules and Regulations will result in the revocation of this permit and refusal of future permits, violations may include additional sanctions and disciplinary action, including warnings, legal actions and/or monetary penalties.

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date)