

**REQUEST PROCESS****Submit 14 days prior to rental date:**

1. Completed application
2. Rental fee (separate payment)
3. Security deposit (separate payment)
4. Copy of certificate of insurance

# Marlborough Parks & Recreation Pavilion Reservation Form

26 North Main St  
 PO Box 29 Marlborough, CT 06447  
 office 860-295-6203; fax 860-295-0317  
 website [www.marlboroughct.net](http://www.marlboroughct.net)  
 e-mail [parkandrec@marlboroughct.net](mailto:parkandrec@marlboroughct.net)

**50% Deposit Required at Time of Reservation – Must be paid in full 14 days prior to event**

*Rental Rates :*

**Entire Pavilion :** 4 hr rental **\$60** (any 4 hour block between 11am-7pm) (maximum of 75 people)

**Entire Pavilion :** 8 hr rental **\$100** (rental time 11am-7pm) (maximum of 75 people)

**Parking Passes :** 15 passes per reservation for non-residents use – additional non-resident cars must park in overflow parking located across the street – Marlborough residents must have a Parking Sticker obtained from the Town Clerk in the Town Hall.

<b>Applicant Name:</b>  First _____  Last _____  E-Mail _____	<b>Date of Event:</b>     	<b>Time Frame</b> Please check <b>Full Day 11<sup>am</sup>-7<sup>pm</sup></b>  <b>Half Day - 4hrs</b> Time period for half day _____	<b># People Attending</b>  Total # Attending _____  Maximum of 75 - Please be as accurate as possible – over 75 people please contact the office for approval – if you indicate fewer than 75 & it is determined you go over 75 you will forfeit security deposit – unless pre-approval was granted. Additional fee over 75 people may be required.
<b>Address</b>  _____  _____		<b>Contact Info:</b> Home Phone # _____  Cell Phone # _____  <b>Best contact # day of event</b> Home    or    Cell (Please Circle)	

**INSURANCE/FINANCIAL RESPONSIBILITY:** The Town of Marlborough does not provide coverage for participants' or spectators' medical, surgical, or hospital expenses arising out of proposed activity. **Applicant is required to submit a CERTIFICATE OF INSURANCE** as a condition for the granting of approval. **Said certificate, in the amount of \$1,000,000 liability, \$3,000,000 aggregate, and \$10,000 medical per occurrence & MUST name the Town of Marlborough as an additional insured.** CONTACT THE OFFICE IF YOU NEED INFORMATION ON HOW TO OBTAIN INSURANCE – IF YOU MUST PURCHASE A POLICY THE AVERAGE POLICY COST IS \$105-\$125. THE TOWN DOES NOT RECEIVE ANY PROCEEDS FROM THE INSURANCE.

**SECURITY DEPOSIT:** Applicant agrees to provide the Marlborough Parks & Recreation Department a security deposit in the amount of \$75. Upon completion of use, security deposit shall be returned in full, if there are no damages or delay in leaving the facility. If there are damages, a delay in leaving the facility, or if clean up is required, the security deposit shall be used to offset the actual cost of repairs, clean up, or over-time. All security deposits are to be in the form of a cash or check; payable to the Town of Marlborough.

**HOLD HARMLESS:** Applicant agrees that it will indemnify and hold harmless the Town of Marlborough and its respective officers, agents, and employees from any loss, cost, damages, expenses, judgments and liability whatsoever kind or nature howsoever the same may be caused resulting directly or indirectly by any act or omission of the applicant, any subcontractor, anyone directly related or indirectly employed by any of them or anyone for whose act any of them may be liable resulting in bodily injury including sickness or death, personal injury or damage to property directly or indirectly, including the loss of use resulting there from as permitted by law.

**RULES & REGULATIONS:** Applicant agrees to abide by all the Rules & Regulations detailed on the Town of Marlborough website ([www.marlboroughct.net](http://www.marlboroughct.net)) for all town parks and athletic facilities.

If the conditions of rental are not met by the stated deadlines the Parks & Recreation Department holds the right to cancel the event or if I cancel the reservation after the deposit or full-payment has been processed, any previous payments will be returned minus a \$15 administrative fee. \_\_\_\_\_ **Initial**

(Signature - Applicant)

(Date)

(Signature – Parks & Recreation Department.)

(Date)

<b>Office Use Only:</b> Complete & Signed Reservation Form Rental Fee \$ _____ Cash    Check    Credit Card Security Deposit \$ _____ Cash    Check Insurance policy # of Parking Passes issued _____
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<b>Office Use Only:</b> Copy to lifeguards Copy to applicant Copy posted at pavilion Parking passes issued
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<b>Office Use Only:</b> Returned Security Deposit on: _____
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