## APPLICATION FOR GROUP PERMIT AT SCENIC HUDSON PARK OR PROPERTY (Please Print Clearly) Activity

Type: (mark appropr	riate)_			
School Trip	_Scout Troop Activity _	Hiking Group	Community Group	Other
Name of proposed function	n:		Scenic Hudson park or property:	
Group leading the event: _			Web site:	
Date of event:	Start time:		End time:	
Rain date (if applicable): _		Set up time:	Clean-up/departure time:	
Mailing address:				
Name and title of event lea	nder:			
Contact information:				
Day phone:	Eve phone:	Cell phone:	Email	
Name and title of event as	sistant:			
Contact information:				
Day phone:	Eve phone:	Cell phone:	Email:	
Is this a fund-raising event? If yes, for what purpose?				
Is there a fee per person/v	ehicle for event?	f yes, how much?	Number of people expected:	
Number of vehicles expected: Is this event being advertised?				
If yes, how?				
Please describe your plans	ned activities including the trai	ls you and your group pla	n to take, if any:	

PLEASE INCLUDE A ROUGH SKETCH OF THE PROPERTY INDICATIING THE LOCATIONS OF YOUR PROPOSED ACTIVITIES. PLEASE BE AS SPECIFIC AS POSSIBLE, INDICATING TRAIL NAMES AND PROMINENT FEATURES WHEN POSSIBLE.

## Mail or fax completed application to:

Scenic Hudson, C/O Park Events Coordinator, One Civic Center Plaza; Suite 200, Poughkeepsie, NY 12601 Fax: (845) 473 -