APPLICATION FOR SPECIAL EVENT PERMIT AT SCENIC HUDSON PARK OR PROPERTY

Name of proposed event: ____________________________________________
Scenic Hudson park or property: ____________________________________

Name of group hosting event: ________________________________________
Web site: _________________________________________________________

Date of event: _____________________________
Time of event: Start time: __________________ End time: ________________

Rain date (if applicable): ___________________________
Set up time: ___________________ Clean-up/departure time: ____________

Mailing address: _______________________________________________________________________________________

Authorized representatives/titles: _______________________________________________________________________

Applicant information:

Name: ____________________________ Day phone: __________________ Eve phone: __________________ Email: __________

Name: ____________________________ Day phone: __________________ Eve phone: __________________ Email: __________

Cell phone on day of event: Name: ____________________________ Cell phone: _________________________

Is this a fund-raising event? ___________ If yes, for what purpose? ________________________________

Is there a fee per person/vehicle for event? _______ If yes, how much? _________

Number of people expected:_______
Number of vehicles expected: _______ Person responsible for parking cars: __________________________

Are you serving food/refreshments? _______ If so, what is being served? _____________________________

Is this event being advertised? ___________ If yes, how? ____________________________________________________________________________

List all equipment and number of each to be used for the event, including vehicles, motorized equipment, sound equipment, power source, toilets, tables, chairs, trash containers, etc.: _____________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

Please describe in as much detail as possible the special activity or event. Include public safety measures to be taken. Describe if other groups will be involved and what their roles will be. Use additional sheets, if necessary.

___________________________________________________________________________________________

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PLEASE INCLUDE A ROUGH SKETCH OF THE PROPERTY INDICATING 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 Senior Community Projects Manager, 85 Civic Center Plaza; Suite 300, Poughkeepsie, NY 12601
Fax: (845) 473-2648