

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

Activity Type: (mark a	ppropriate)				
School Trip	_Scout Troop Activity	Hiking Gr	oupCommunit	y Group	Othe
Name of proposed function:_			Scenic Hudson park o	or property:	
Group leading the event:			Web site:		
Date of event:	Star	t time:	End time:		
Rain date (if applicable):	Set up tim		Clean	Clean-up/departure time:	
Mailing address:					
Name and title of event leade	er:				
Contact information:					
Day phone:	Eve phone:	Cell			
phone:	Email		Name and title of event a	essistant:	
				Contact information	n:
Day phone:	Eve phone:	Cell pho	ne:		
	Email:	ls	this a fund-raising event? _	If yes, for what purpos	ie?
			Is there a fee per pers	son/vehicle for event? I	fyes, how
much? Numbe	r of people expected:				
Number of vehicles expected	: Is this event being	ng advertised?			
If yes, how?					
Please describe your planned	d activities including the tra	ls you and your gro	up plan 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.

Email completed application to:

aconeski@scenichudson.org

or mail to: