



THE BOROUGH OF JENKINTOWN

P.O. BOX 2176
700 SUMMIT AVENUE
JENKINTOWN, PA 19046
WWW.JENKINTOWNBORO.COM

215/885-0700

APPLICATION FOR USE OF TOWN SQUARE

PLEASE PRINT OR TYPE

Date of Application _____

Organization: _____

Contact: _____

Purpose of Organization: _____

Address: _____

Telephone #: _____

Cell # _____

Email _____

List one other Contact: _____ Telephone #: _____

Individual requesting facility: _____

Part of Town Square requested (Gazebo area, sidewalk, square, parking lot etc) _____

Estimated number of people using facility: _____

<u>DATE(S)</u>	<u>FROM</u>	<u>TO</u>	<u>SPECIAL EQUIPMENT AND CONSIDERATIONS</u>
START: _____	_____	_____	_____
END: _____	_____	_____	_____
DAY: _____	_____	_____	_____

Purpose of Use: _____

Applicant agrees to provide a certificate of insurance that lists the Borough as a named insured.

The undersigned has read the attached regulations and agrees to abide by the policies contained herein.

Name: _____ Telephone #: _____

Address: _____
(city) (state) (zip code)

APPROVED _____

DATE: _____

REJECTED _____

BOROUGH MANAGER