



**YORK CITY RECREATION AND PARKS BUREAU
APPLICATION PERMIT AND RESERVATION FORM
FOR RECREATIONAL FACILITY RENTAL**

Mayor C. Kim Bracey
James E. Gross, Director

Main Office - PHONE: 717-854-1587 * FAX: 717-845-7457

NOTE: All events must end and building vacated no later than 11:00 P.M.

PROGRAM INFORMATION

NAME OF PROGRAM/ORGANIZATION: _____

BUILDING REQUESTED: _____

REASON FOR BUILDING RENTAL: _____ ESTIMATED ATTENDANCE: _____

DATE (S) OF RENTAL: _____ Time _____ to _____

_____ Time _____ to _____

_____ Time _____ to _____

NAME OF RESPONSIBLE PERSON: _____

ADDRESS: _____

Street

City

State

Zip Code

HOME PHONE: _____ WORK PHONE: _____

RECREATIONAL FACILITIES: (See attachments for facility specifics.)

Please check the appropriate box for choice of facility.

- VONI B. GRIMES GYM, 125 E. COLLEGE AVE, YORK, PA - 1000 PERSON CAPACITY (ATHLETIC EVENTS ONLY)
- PRINCESS STREET CENTER, 368 W. PRINCESS STREET, YORK, PA -135 PERSON CAPACITY
- ROTARY-KRANICH HALL, 120 S. LEHMAN STREET, YORK, PA - 80 PERSON CAPACITY (NOT AVAILABLE)
- YORKTOWN CENTER, 1059 KELLY DRIVE, YORK, PA - 47 PERSON CAPACITY

RENTAL FEES: (MAKE CHECK PAYABLE TO: CITY OF YORK)

CITY RESIDENTS: \$45.00 PER HOUR X _____ (NO. OF HOURS) = \$ _____

NON-CITY RESIDENTS: \$55.00 PER HOUR X _____ (NO. OF HOURS) = \$ _____

CITY YOUTH NON-PROFIT: \$25.00 PER HOUR X _____ (NO. OF HOURS) = \$ _____

TOTAL COST FOR FACILITY MONITOR (NO. OF HOURS _____ @ \$10.00/ HR.) = \$ _____

ADDITIONAL NEEDS/COST: _____ = \$ _____

> TOTAL AMOUNT DUE FOR RENTAL: _____ = \$ _____

DEPOSIT (50% OF FACILITY RENTAL DUE WITH RESERVATION) = \$ _____

BALANCE DUE = \$ _____ DUE DATE: _____

RECREATIONAL FACILITIES ARE NOT APPROVED AS A PUBLIC EATING OR DRINKING ESTABLISHMENTS.

I, AS THE REPRESENTATIVE OF THE ABOVE MENTIONED GROUP OR ORGANIZATION, FULLY AGREE THAT I HAVE READ AND UNDERSTAND THE RESERVATION POLICY AND WILL ABIDE BY ALL THE TERMS AND CONDITIONS CONTAINED HEREIN. I RECOGNIZE THAT I WILL BE HELD RESPONSIBLE FOR THE COSTS OF ANY DAMAGES.

AGREED TO AND ACCEPTED ON _____ **DATE** _____ **SIGNATURE** _____

MAIL TO: YORK CITY RECREATION AND PARKS, 1 MARKETWAY WEST – 3RD FLOOR, YORK, PA 17401 – 1231

ACCEPTABLE FORMS OF PAYMENT: CASH, CHECK OR MONEY ORDER

MAKE CHECK PAYABLE TO: CITY OF YORK

FOR OFFICE USE ONLY

APPROVED * **DENIED:** _____ **Director of Public Works** **Date** _____

PAID IN FULL \$ _____ Check/MO# _____ Date _____; Cash _____ Date _____

Deposit Amount Paid \$ _____ Check/MO# _____ Date _____; Cash _____ Date _____

Balance Amount Paid \$ _____ Check/MO# _____ Date _____; Cash _____ Date _____