



TOWN PARK PAVILION RESERVATION APPLICATION
WINTER NON-EXCLUSIVE USE ONLY!

Groups may apply to host a birthday party or other social gatherings during public skate and/or youth drop-in hockey times. The facility must remain open to the public during the reserved time.

Please contact Ashley Samuelson at 970-728-2174 or email Ashley at asamuelson@telluride-co.gov to discuss possible dates and times. Please note that availability may be unknown until 2 weeks prior to the requested date.

Organization or Event: _____

Requested Date(s): _____ Time: _____

_____ Time: _____

_____ Time: _____

Contact Person: _____

Mailing Address: _____

Day Phone #: _____

E-mail Address: _____

How many people are you expecting? _____

Describe your requested use of the Pavilion (Attach a separate sheet, if necessary):

Explain how you will mitigate the parking/traffic impacts in Town Park associated with your request:

Please refer to the attached Pavilion Management Plan for information on the application process and permitted uses.

Pavilion users are responsible for all clean-up and events must provide their own trash bags and cleaning supplies.

TOWN PARK PAVILION RESERVATION AGREEMENT

WINTER NON-EXCLUSIVE USE ONLY!

Deposit Check: Please submit a **check payable to the Town of Telluride for a clean-up deposit** with your reservation form to the Parks and Recreation Office in Town Park.

\$50.00 for groups of **50 people or less.**

\$250.00 for groups of **over 50 people.**

Please sign and provide information requested in box below.

I have read and fully understand all information on the Town Park Pavilion Reservation Request and Management Plan. As the designated individual or representative of the organization or group listed below, I state that this organization or group will not hold the Town of Telluride, the Parks & Recreation Department or Board, or any Town personnel responsible for any accident or injury that may occur during use of the Town Park Pavilion. I further understand that clean-up must be completed by the appointed date and to standards set by the Parks and Recreation Department.

Event manager's signature: _____

Note: Please include a self-addressed stamped envelope with your deposit. If no envelope is provided, we will shred your check after your event if the requirements of this Agreement, application, and management plan are fulfilled as stated.

Person in charge of clean-up: _____ **Phone:** _____

CLEAN-UP CHECKLIST

Lobby & Rink:

_____ Pick up all trash	_____ Empty trash containers
_____ Wipe down tables and counters	_____ Clean windows (if needed)
_____ Sweep/mop floors	_____ Wipe walls (if needed)
_____ Empty trash	_____ Replace trash bags
_____ Remove signs & decorations	

Restrooms:

_____ Empty trash _____ Clean sink & toilets _____ Sweep/mop floors

STAFF:

Tentative in MAX: _____ Date and Time of Clean-up Inspection: _____

Reserved in MAX: _____ Deposit received/ Check #: _____ Copy emailed: _____

Event approved by Parks & Recreation Director: _____

Staff Comments:

Date deposit check shred / sent back: _____