



Town of Clifton Park

Office of Parks and Recreation

One Town Hall Plaza, Clifton Park, New York 12065 | (518) 371-6667 | Fax: (518) 545-4284

Mike Woerner, Director

2025 ADVENTURE CHALLENGE COURSE RENTAL APPLICATION

General Information

Name of Organization: _____ Today's Date: _____

Contact Person: _____

Address: _____

Phone: _____ (cell) _____

Email: _____

Dates Requested:

Please provide your top 3 dates and time:			
1 st Choice Date:		1 st Choice Time:	
2 nd Choice Date:		2 nd Choice Time:	
3 rd Choice Date:		3 rd Choice Time:	

Estimated number of participants: _____ Age range of participants (ages 7+): _____

Permit is governed by the following conditions:

1. Permits valid for date(s), restricted to facility, and number of participants as indicated on permit.
2. Area and facility must be left clean. Any damage incurred is the responsibility of the permit holder.
3. Town of Clifton Park park rules (see attached) shall be adhered to. Immediate termination of the event and removal from the premises may occur by an authorized representative of the Town if in violation of these rules and regulations.
4. Obnoxious behavior or excessive noise will not be permitted.
5. Permit holder must retain permit and make available upon request by park or police official.
6. Open containers of alcoholic beverages are prohibited in all parks, unless a permit has been issued which allows for the consumption of alcoholic beverages on the premises for which the permit has been issued. Such permits are authorized solely by the Town Board via resolution. A separate "Special Alcohol Use Permit Request" form must be submitted with this form.
7. Permits are available through Clifton Park Office of Parks and Recreation and must be posted at the facility rental site.
8. Permit holder may be required to obtain and show proof of insurance naming Town of Clifton Park as an "Additional Insured".

I have read the Town of Clifton Park rules and the above special conditions and agree to abide by them. I understand there is a **no refund policy** on this rental. The town will work with me on rescheduling, when possible, if needed.

Indemnity: _____ (NAME) agrees to indemnify and hold the Town, it's officers, employees, representatives and/or agents harmless with respect to any and all claims, causes of action, suits, proceedings, damages, liabilities, losses, costs and expenses, including third party claims or actions and attorneys' fees, in connection with loss of life, personal injury and/or any loss of life, personal injury and/or property damage which may arise from and as a result of the negligent acts or omissions of _____ (NAME) or others associated in some way therewith, during or arising out of the use of any park facility located in the Town of Clifton Park, County of Saratoga, State of New York on _____ (DATE).

Signed: _____ Approved: _____
Applicant for Permit Parks & Recreation Office

Date: _____

RENTAL FEE SCHEDULE

Half Day Rate (4 hours)

Number of Participants:	Minimum Staffing:	Fee:	Rate per additional hour:
1 – 12	1 Facilitator & 1 Assistant	\$250	\$75
13 – 18	1 Facilitator & 2 Assistants	\$325	\$100
19 – 24	1 Facilitator & 3 Assistants	\$400	\$125

TOWN OF CLIFTON PARK - PARK RULES

- All parks open at 5:30 a.m. and close at 10 p.m.
- **No person may drink, consume, or possess alcoholic beverages in any town park or in any park within a park district or in any other lands or property owned by the town. If any person in your group is caught with an alcohol beverage, they will be fined, and your permit will be taken away. INITIAL _____
- Trail bikes and ATVs are prohibited. INITIAL _____
- Bikes are to be ridden only on bike paths, absolutely no riding on basketball or tennis courts. INITIAL _____
- Leash law is in effect. INITIAL _____
- Bands and stereo equipment (except radios) are prohibited in park areas. INITIAL _____
- Use of golf clubs on parkland is prohibited, with the exception of Barney Road Golf Course. INITIAL _____
- *Please pick up after yourself. Carry-in, carry-out policy. The Town of Clifton Park requires that you take out what you bring in. If you would like to pay an additional \$75.00 per day for trash removal, please indicate.
Yes _____ No _____ INITIAL _____

Thank you for your cooperation and enjoy your day!

FOR OFFICE USE ONLY	
Date contacted Nolan Yowell to schedule event:	
Confirmed Date and Time:	
Confirmed number of participants:	
Information and Consent Forms distributed:	
Total Due:	
Date Paid:	
Payment Method:	