



PO Box 1, Pocopson PA 19366  
Office: 610.793.2151 Fax: 610.793.1944  
www.pocopson.org

**POCOPSON TOWNSHIP  
APPLICATION FOR USE OF TOWNSHIP FACILITY**

Organization/Group Name and Address:

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Date(s) Requested \_\_\_\_\_ Time: \_\_\_\_\_ to \_\_\_\_\_

Contact Name

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Telephone (Day) \_\_\_\_\_ Telephone (night) \_\_\_\_\_

Cell \_\_\_\_\_

Purpose for Use of Facility:

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**PLEASE NOTE: NO FEE DUE PER USE.**

**RULES AND REGULATIONS FOR USE OF TOWNSHIP BUILDING MEETING FACILITIES**

- If you need to cancel or change your reservation, the Township must be notified at least 24 hours in advance of the reserved date.
- Township meetings, programs and activities have priority over any other use scheduled.
- Users may provide and operate their own audio, video or related equipment.
- Profit-making, which benefits private parties or organizations, may not occur during the use of the facilities.
- It is the responsibility of each individual or group using the public room to return the room to its original configuration including rearranging the chairs and tables.
- All trash and debris, other than that which can be placed into the wastebasket, must be removed. Please place recyclables in the recycling container.
- The individual or group is responsible for any damages incurred while using the facility.
- The following are not permitted: smoking, alcohol or drug use.
- Township staff cannot accept calls for persons using Township facilities.
- Certificate of Insurance must be attached to this application.



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**RETURN COMPLETED APPLICATION AND RELEASE FORM TO:**

Receptionist  
Pocopson Township, P.O. Box 1, Pocopson, PA 19366  
Telephone: 610-793-2151  
Fax: 610-793-1944  
Email: [receptionist@pocopson.org](mailto:receptionist@pocopson.org)

As representative for the group, I have read the above Rules and Regulations and take responsibility for the actions of myself and the group during the time of use. I have also read and signed the attached Release Form.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

GRANTING PERMISSION TO USE THE TOWNSHIP FACILITY DOES NOT IN ANY WAY CONSTITUTE AN ENDORSEMENT OF THE INDIVIDUAL'S OR ORGANIZATION'S POLICIES OR BELIEFS BY THE TOWNSHIP BOARD OF SUPERVISORS OR THE TOWNSHIP STAFF.

<b>FOR OFFICE USE ONLY</b>	
APPLICATION STATUS: APPROVED _____ DENIED _____	
CERTIFICATE OF INSURANCE RECEIVED ON: _____	
APPLICANT NOTIFIED ON _____ PERSON _____	BY: PHONE _____ MAIL _____ IN
FAX _____	



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## Pocopson Township Release Form

INTENDING TO BE LEGALLY BOUND HEREBY,

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(Name of individual or group)

agrees to hold harmless and indemnify Pocopson Township, its supervisors, managers, agents, employees, and contractors (the "Township"), from and against any and all liability, loss, damage, expense, actions, causes of action, suits, claims, or judgments arising from, resulting from, or based on the use, occupation or enjoyment by

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(Name of individual or group)

of real property or personal property or fixtures or facilities owned or occupied or leased or held by the Township; and said

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(Name of individual or group)

shall, at its own cost and expense, defend any and all suits including those based on negligence or negligent acts which may be brought against the Township, its officials and employees either alone or in conjunction with others, upon any such liability or claim or cause of action and shall satisfy, pay, and discharge any and all judgments that may be recovered against the Township in such action(s) or suit(s).

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(Signature of Individual or Authorized Agent)

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(Date)

**This Release Form must be signed and submitted along with the  
Application for Use of Township Facility.**