



# Crescent Township

225 Spring Run Road  
Crescent, Pennsylvania 15046

Office: 724.457.8100  
Fax: 724.457.2045  
www.crescenttownship.com

## Shouse Park Rental Permit

**PARK ADDRESS: 1391 McCUTHCEON WAY, CRESCENT, PA 15046**

NAME: \_\_\_\_\_ RENTAL DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

<u>PAVILION RENTED (circle below)</u>		
HUWAR	DAVIS	WALTERS

PHONE: \_\_\_\_\_ RENTAL CHARGE: \_\_\_\_\_ + \$50.00 (Deposit) = \_\_\_\_\_

Cash or Check # \_\_\_\_\_ Received by: \_\_\_\_\_

### RULES FOR PAVILION USE & DEPOSIT REFUND

**The key must be picked up during Municipal business hours (M-F 8:30 am-4 pm)**

- Trash must be put in plastic bags and placed in dumpster.
- It is illegal to possess or consume alcohol in Shouse Park without obtaining an alcohol permit from the Township Office.
- No glass bottles of any kind.
- No tents permitted in the park.
- Parking permitted in parking area only.
- No vending permitted in park.
- No open fires (charcoal and propane contained grills only).
- Pavilion use from 9:00 a.m. to 10:00 p.m.
- If tables are moved, they must be returned to their original place.
- All decorations must be removed.
- The Township must pre-approve all banners, additional structures, gaming sets, or any equipment brought in by renter
- Abusive or offensive language or behavior shall not be tolerated.
- The use of explosives is prohibited.
- Sling-shot is prohibited
- Skateboarding or roller blading on or off picnic tables, planter, playground apparatus or other park equipment is prohibited.
- No ANIMALS allowed in the park

*The \$50.00 deposit will be returned only after all above rules were followed and NO DAMAGE was reported. Any damage that was done must be paid for by the renter, including a \$25.00/hr per township employee needed to complete the repairs, clean up or key pick up during off Municipal business hours. It is the renter's responsibility to pick up the key at least one business day before the rental. Key MUST be returned the first working day after the rental to receive refund of deposit. All lights must be turned off. Extra charge when lights are left on overnight.*

I, \_\_\_\_\_ on \_\_\_/\_\_\_/\_\_\_ have read and agreed to the rules set forth by Crescent Township for the use of Shouse Park rentals.

Received: Key # _____	DATE: _____	BY: _____
Returned: Key # _____	DATE: _____	BY: _____

**SHOUSE PARK RENTAL AGREEMENT**  
**1391 McCUTCHEON WAY, CRESCENT, PENNSYLVANIA 15046**

The undersigned person \_\_\_\_\_, requests to rent the \_\_\_\_\_ Pavilion in Shouse Park, Crescent, PA . As a prerequisite to the rental of the pavilion, the undersigned agrees **NOT** to permit the consumption of alcoholic beverages at the event unless proof of liability insurance coverage is provided to the Township Office in advance of the event. A photocopy of the front page of a homeowner's or general liability insurance policy, which will be in effect at the time of the event. The undersigned is insured, shall constitute proof of liability insurance coverage. The undersigned further understands and agrees that the provision and use of alcoholic beverages at the event must comply with the laws of the Liquor Control Board of Pennsylvania and that the laws expressly forbid the consumption of alcohol beverages by persons under the age of twenty-one (21) years of age. **(NO GLASS BOTTLES OF ANY KIND ARE PERMITTED IN THE PARK. THE RENTER ASSUMES ANY AND ALL LIABILITY FOR INJURIES RESULTING FROM BROKEN GLASS AS A RESULT OF VIOLATION THE RULE)**. The Township is not responsible for any injury to persons using the park facilities, or for damage to their personal property. Parking is at your own risk. All groups or persons reserving Township facilities agree to assume responsibility and liability for any damage to property and/or injury to persons incurred through use of the facility and relieve and release the Township of any responsibility for such losses, damage and injuries. Certain groups that are associates and/or incorporated are required to provide a certificate of insurance as proof of liability coverage and list the Township as an additional insured. Individuals need to provide a photo copy of a homeowners insurance policy.

\_\_\_\_\_  
Printed Name of Renter

\_\_\_\_\_  
Signature of Renter

\_\_\_\_\_  
Date Signed

\*The terms of this Agreement are required by Crescent Township's liability insurer, MRM Property & Liability Trust.

Three week notice of cancellation required for refunds