



TOWN OF ISLIP DEPARTMENT OF PARKS, RECREATION & CULTURAL AFFAIRS

50 IRISH LANE • EAST ISLIP, NEW YORK 11730-2098 • (631) 224-5411

Angie M. Carpenter, Supervisor
Thomas S. Owens, Commissioner

**2024 TOWN OF ISLIP
APPLICATION FOR USE OF FACILITIES • BEACHES/PARKS/POOLS/FACILITIES**

If your event is over 200 people, please fill out the Town Clerk's Carnival, Circuses, Concerts, Outdoor Events Application or the Parade, Race and Assembly Application

This application must be submitted 60 days prior to the event.

FACILITY REQUESTED: _____

APPLICANT'S NAME: _____ **MUST BE 21 YEARS OR OLDER**

NAME OF ORGANIZATION OR COMPANY: _____

MAILING ADDRESS: _____

HOME PHONE: _____ CELL: _____ EMAIL: _____

ACTIVITY PLANNED: _____

Do you charge admission or fees to participate with your group? YES NO

If so, how much and what is it used for? _____

DATE(S) REQUESTED: _____ M T W TH F SAT SUN
PLEASE CIRCLE APPROPRIATE DAY(S)

RAIN DATE: _____ **Must be paid for in full. NO REFUNDS.**

TIME REQUESTED: START: _____ END: _____ EST. # OF VEHICLES: _____

ESTIMATED NUMBER OF PEOPLE INVOLVED: _____ WILL NEED BATHROOMS OPENED: YES NO

ALL GROUPS SEEKING NON-PROFIT RATES must submit evidence of incorporation as a non-profit organization either from the NY State Dept. of Finance or the Federal IRS. Groups may also be required to submit their by-laws, publications, registration fees, or rosters upon request.

Tax Exempt # _____

All members of the event must show either a Town of Islip Recreation Card, Disabled Recreation Card, Senior ID card or pay the appropriate gate admission. **WE DO NOT GUARANTEE PARKING SPACES.**

I have read the rules and regulations governing the use of Town property. By my signature, I, as well as the members of my group or organization, which I represent that we will abide by the rules and regulations. Please initial here _____

PLEASE SEE REVERSE SIDE FOR FEES AND PAYMENT INFORMATION.

APPLICANT'S SIGNATURE: _____ (MUST BE 21 YEARS OR OLDER) TODAY'S DATE: _____

OFFICE USE ONLY

APPROVED DENIED REASON: _____

APPLICANT NAME: _____ GROUP NAME (if applicable): _____

FACILITY: _____ DATE/TIME: _____

CAMP PAYMENT INSTRUCTIONS: _____ DATE/TIME: _____

FEE REQUIRED: YES NO AMOUNT PAID: _____ INSURANCE REQUIRED: YES NO

INCIDENT ACTION PLAN REQUIRED: YES NO COMMENTS: _____

DIVISION APPROVAL: _____ DATE

DEPUTY/COMMISSIONER: _____ DATE

*** PLEASE BRING THIS APPROVAL SLIP WITH YOU ON THE DAY OF YOUR EVENT *
During your event if you need assistance, please call Public Safety at 631-224-5306.**



**2024 TOWN OF ISLIP
 APPLICATION FOR USE OF FACILITIES • BEACHES/PARKS/POOLS/FACILITIES
 Fees and Payment Information**

<u>BEACH & PARK FEES</u>		
<u>GROUP SIZE</u>	<u>RESIDENT</u>	<u>NON-RESIDENT</u>
1-50	\$75.00	\$100.00
51-100	\$125.00	\$150.00
101-200	\$175.00	\$250.00

Groups 201 or more, If your event is over 200 people, fill out the Town Clerk's [Carnival, Circuses, Concerts, Outdoor Events Application](#) or the [Parade, Race and Assembly Application](#)

For more information on these applications, please call the Town Clerk's Office at 631-224-5490.

<u>CAMP POOL FEES</u>
Non-Profit Resident Camps \$8.00 per person
Private Camps/Non-Resident \$10.00 per person
CAMPS USING THE POOL MUST PAY AT THE POOL.

<u>SWIM CLUB POOL FEES</u>	
Resident Swim Clubs	\$150.00 per day
	\$175.00 per night
Non-Residents Swim Clubs	\$200.00 per day
	\$250.00 per night

PAYMENT INFORMATION

We accept Check, Money Order, or Credit Card
 Make Check or Money Order payable to the *Town of Islip*.
 We only accept Visa or Master Card.
2.65% + 0.25 service fee to be applied to all credit card charges

Check #: _____

CC #: _____

Exp. Date: _____

Billing Zip: _____

3 Digit Security Code: _____

Amount Paid: _____