



# Battery Park Event Application

After reading all the Rules and Guidelines, please fill out this application form and submit below. We will respond to you within one week.

Date and Time of Event

Name of event

Expected Number of Attendees

Your Name

Name of Your Organization

Address

Is This a Repeat Event in Battery Park? If so, give previous date(s)

Is Your Organization a 501(c)(3) non-profit?  
If so, we will need a copy of the IRS letter before  
application can be approved.)

Email Address

Phone Number

**If you are not the Event Coordinator, please provide their full name, the name of their organization, and their phone number**

**Will You Need Electricity? See guidelines for usage.**

**Will You Use Staging?  
See guidelines for use and fees.**

**Will Portable Toilets Be Used? If so,  
provide the name of the vendor.**

**List All Additional Equipment Being Used (Vehicles, Tables, Chairs, Rides, Grills, Tents, etc.)**

**Will Food Be Sold At The Event?  
Vendors must obtain a  
State of Delaware Health Permit**

**Will Alcohol Be Sold At The Event?  
See guidelines.**

**What Else Will Be Sold At the Event, if Anything? (See guidelines - some items are prohibited.)**

**Do You Have Event Liability Insurance?**

**You MUST have a policy by the time of the event. THE CITY OF NEW CASTLE and THE TRUSTEES OF THE NEW CASTLE COMMON must BOTH be named as additional insureds. Please provide a copy of the policy to the Trustee office and reference your Event Name and Date.**

**I understand that Battery Park is a Carry In/Carry Out park, and I agree that it is my responsibility collect any trash produced by this event, and arrange for proper disposal. Failure to do so will result in park maintenance/trash pick up fees being deducted from your deposit. I have read and accept all Battery Park Guidelines and Rules. I understand and agree that it is my responsibility to ensure all participants comply with all permit directions and conditions and with all applicable laws and ordinances. Both the organization listed above and I accept all risk and liability for, and agree to hold The Trustees of the New Castle Common and the City of New Castle harmless from any and all claims, suits or actions, rising out of any claims for property damage or personal injury sustained as a result of the permitted event.**

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please complete form in its entirety, noting "not applicable (n/a)" where necessary. Also, make sure to provide attachments as applicable. Incomplete or illegible forms will be returned to sender.

**Return Form to The Battery Park Committee**

**By email: office@trusteesncc.org**

**By mail: PO Box 453, New Castle, DE 19720**

**By hand: Trustees Office, Penn Farm, 807 Frenchtown Road, New Castle, DE 19720**

**OFFICIAL USE ONLY:**

**DATE RECEIVED**

Battery Park Event Request Form	PARK	
Event Request Fee	PARK	\$ _____
Parade & Assembly Permit & Fee	CITY	\$ _____
General Liability Certificate of Insurance	PARK/CITY	
Workman's Compensation Insurance	PARK/CITY	
Automobile Liability Insurance (if required)	PARK/CITY	
Liquor Liability Insurance (if required)	PARK/CITY	
Event layout	PARK	
Security Deposit (if required)	PARK	\$ _____
Grounds Repair Fee (if required)	PARK	\$ _____
Park/Facility Use Fee	PARK	\$ _____
Electrical access fee (if applicable)	CITY/MSC	\$ _____

**APPROVED:** \_\_\_\_\_  
**BATTERY PARK COMMITTEE**

**DATE:** \_\_\_\_\_

**APPLICANT NOTIFIED BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_