Hanover Trolley Trail Special Event Reservation Form

Complete and return to: YCRTA, PO Box 335, Seven Valleys, PA 17360 or Email: info@yorkcountytrails.org
Save a copy for your records.

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Date: Organization Name:	
Event N	Organization Name: Name: Event Date & Time: Section Requested (from/to):
Facility	Section Requested (from/to):
Contact	t Name:
Contact	t Telephone: Contact Email: nformation: (Include estimate of anticipated number of participants)
Other I	nformation: (Include estimate of anticipated number of participants)
CONDI	TIONS OF USE:
2. 3. 4. 5. 6. 7. 8. 10. 11.	CERTIFICATE OF INSURANCE IS REQUIRED. The Organization and its invitees shall indemnify, save harmless and defend the County of York, York County Rail Trail Authority, and the municipality(s) in which the event will be held from any and all claims, damages, injuries and/or expenses arising out of this activity or event at this facility. The Organization shall maintain liability insurance coverage in an amount not less than \$1 million per occurrence. County of York, York County Rail Trail Authority, and the municipality (s) are to be listed as "Certificate Holders." Mail Certificate of Insurance to: YCRTA, PO Box 335, Seven Valleys, PA 17360, Fax to: (717) 428-0998, or Email to info@yorkcountytrails.org at least 10 business days prior to event. One-day event only. Facility available daylight hours only. For emergencies contact 911. PROHIBITED ACTIVITIES are posted on each trail gate. 'Carry in-Carry out' for all trash. Must have a staggered start or begin elsewhere so the trail is not blocked to the casual user. Participants must be informed that they do not have exclusive use of the trail. All event materials, including signs, literature, tables, etc. must be removed at the conclusion of the event and area restored to original condition. Do not spray paint or otherwise mark trail or corridor. Solicitation of any nature is prohibited without prior written approval. It is the responsibility of the Event Organization to comply with all governmental ordinances. Those receiving this Event Reservation Form are responsible for the conduct of all participants and spectators and shall provide all supervision to handle anticipated crowds.
	ng, I understand that permitting this event is subject to compliance with the above ons of Use and may be revoked upon any violation of said Conditions of Use.
Signatu	re: Date:
	Name: Organization:
	To be completed by York County Rail Trail Authority
York Co	ounty Rail Trail Authority hereby grants
roproces	(Organization Name)
represer	(Contact Name), permission to use the
	(Continue Limite)

Facilities as outlined, subject to the Conditions of Use on this Event Reservation Form.

Date: _____ Signed: ____