

Schwenksville Meadow Park Pavilion

If you are interested in reserving the Picnic Pavilion at Schwenksville Meadow Park, we would be happy to assist you!

Please call the Borough office at 610-287-7442 or e-mail us at gail@schwenksville-pa.org

Meadow Park Pavilion Reservation Form

Pavilion Fee: \$45 with a \$25 deposit (separate checks or cash)

Seats/Tables:

There are 4 picnic tables total.

Charcoal Grills:

Two charcoal grills. You must provide your own charcoal & lighter fluid.

Gas grills are **NOT** permitted.

Trash:

Please take your trash with you,

Restrooms:

Located at 300 Main Street. Will be open the day of your event.

Name _____ Event date _____
 Address _____ Start Time _____ End Time _____
 City/State _____ Zip _____ Phone _____ # people _____
 Type of Event _____ E-mail _____

This agreement between hereinafter called the "permittee" and Schwenksville Borough is as follows: Whereas the permittee does hereby surrender, release and forever discharge Schwenksville Borough, its servants, agents, successors and assigns from any and all liability of any nature and/or any and all actions and cause of action(s), suit, debt(s), dues, accounts, bonds, covenants, contracts, agreements, judgments, claims and demands of whatsoever nature in law of inequity arising from or due to the use of a Montgomery County property. The permittee also agrees to indemnify, defend and hold harmless Schwenksville Borough, the County of Montgomery, its agents, employees, servants, successors and/or assigns from any and all claims and losses accruing or resulting to any person, firms or corporations in connection with the usage of the above listed premises. I have read and will be responsible for ensuring that the Division procedures, rules and regulations will be followed. By signing below, I am indicating that I have read and understand the above and will abide by these and other applicable Parks, Trails & Historic Sites regulations.

Date: _____ Permittee Signature: _____

Print Name: _____

Park Staff

Signature _____ fee paid \$ _____ method _____ date _____