



# DREXEL LODGE RENTAL PERMIT

Rental Date \_\_\_\_\_ Hours \_\_\_\_\_ to \_\_\_\_\_

Type of Even being held: \_\_\_\_\_

Number of people attending the event: \_\_\_\_\_

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## FOR A PRIVATE EVENT

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

## FOR COMPANY/BUSINESS EVENT

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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## ENTERTAINMENT

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## FOOD SERVICE

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

TRAIN MUSEUM: \_\_\_\_\_ yes \_\_\_\_\_ no. If yes, what time? From \_\_\_\_\_ to \_\_\_\_\_

**A CERTIFICATE OF INSURANCE MUST BE PROVIDED TO THE TOWNSHIP NO LATER THAN FIVE (5) DAYS PRIOR TO THE EVENT**

**TOWNSHIP USE ONLY:**

\_\_\_\_\_ Event Fee Received

\_\_\_\_\_ Insurance Received

\_\_\_\_\_ Deposit Received

\_\_\_\_\_ Train Museum to be opened

FEE FOR EVENT: \$175.00

Date Received: \_\_\_\_\_

Please note that if your event is cancelled on your account, we will charge a \$25.00 cancelation fee.

Cash \_\_\_\_\_ Check \_\_\_\_\_

Check Number \_\_\_\_\_

SECURITY DEPOSITE: \$25.00

Date Received: \_\_\_\_\_

Your group is/are responsible to clean up all areas of the park immediately after your event. If the park is locked, cleaned and there is no damage or destruction and the keys are returned, the \$25.00 will be returned to you. Any expense incurred by the Township to do so will result in the loss of your deposit. If the Township is required to repair any damage to the facilities, you will be charged for the full amount of the repairs.

Cash \_\_\_\_\_ Check \_\_\_\_\_

Check Number \_\_\_\_\_

\_\_\_\_\_ ("Applicant") individually and on behalf of its members, guests and affiliates, does hereby waive, release and forever discharge any and all rights and claims against the Township of Newtown, its servants, agents, employees, for any damages, losses or injuries that may incur at any time as a result Applicant's use of park/facility that is the subject of this application, regardless as to whether the damages, losses or injuries are a result of negligence or carelessness.

If anyone shall at any time bring an action or claim for damages against the Township as a result of any damages or injuries incurred during or as a result of the use of the park/facility that is the subject of this application, Applicant, will defend, indemnify and hold harmless the Township, and satisfy any judgment or award, to the extent of the Township's liability.

*I have read the attached and agree to all terms within and agree to the best of my knowledge that the above information is true and correct.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

.....

Township Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Date Drexel Lodge Keys Picked Up: \_\_\_\_\_

Date Drexel Lodge Keys Returned: \_\_\_\_\_

Date Deposit Refunded: \_\_\_\_\_

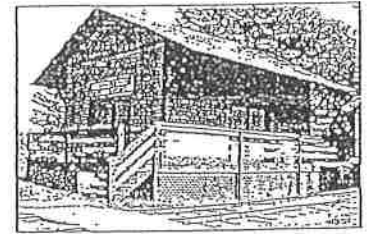
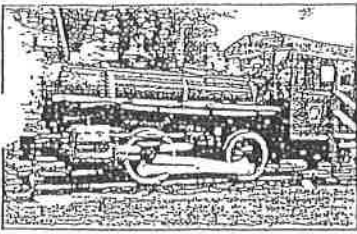
If deposit is not refunded, explain why: \_\_\_\_\_

\_\_\_\_\_

DREXEL LODGE PARK  
4140 West Chester Pike  
Newtown Square, PA 19073

### **TIPS FOR YOUR EVENT:**

1. A certificate of Insurance is needed from an insurance company in order to secure your event. You can check with your own insurance company or choose another company (you can also check with [www.wedsafe.com](http://www.wedsafe.com)). You will need to get a one day rider for insurance and the Township would need to be listed as the additionally insured for the day. The Certificate Holder should be listed as: Drexel Lodge Park, 4140 West Chester Pike, Newtown Square, PA 19073.
2. You can pick up the keys the Thursday or Friday before your event and they must be returned the following Monday (our hours are 8:30am-4:30pm).
3. If you are having the train museum open during your event, it will be available for 2 hours. (This must be pre-arranged prior to the event; refer to the form attached.)
4. You must set up and clean up yourself (this will NOT be done by the Township).
5. If the park is locked, cleaned and there is no damage or destruction and the keys are returned, the \$25.00 deposit will be returned to you. Any expense incurred by the Township to do so will result in the loss of your deposit. If the Township is required to repair any damage to the facilities, you will be charged for the full amount of the repairs.
6. If anyone interferes or imposes on your event for the day, please call 911 for police assistance.
7. If you are giving directions to your friends and family and are using MapQuest-use 4100 West Chester Pike & tell them it's 4 blocks away (4140 WCP won't come up).
8. If you are using tablecloths, don't use tacks because the wind will rip the tablecloth. Please use duct tape or clear tape instead. The pavilion has 16 tables (with benches) that are 10' long by 28" wide.
9. If your event gets rained out and you need to cancel it, we will refund the amount except for \$25.00 (for a cancellation fee).



NEWTOWN SQUARE  
 PENNSYLVANIA RAILROAD MUSEUM ASSOCIATION  
 POST OFFICE BOX 21 NEWTOWN SQUARE, PA 19078

REQUEST FOR RESERVATION TO VISIT  
 NEWTOWN SQUARE PRR 1895 FREIGHT STATION MUSEUM

ENT Date \_\_\_\_\_ Name of Individual/Organization \_\_\_\_\_

Address \_\_\_\_\_

Type of Event \_\_\_\_\_ Number in party \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_

Time you would like to visit Museum \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.

PLEASE NOTE:

There is no admission charge to visit the Museum Facility. We will except Donations, (This is optional, your choice) that will be used to pay expense's such as utilities, equipment maintenance, improvements, and insurance.

Donation \$ \_\_\_\_\_ (Make checks payable to Newtown Square PRR Museum Association (NSPRMA)).

Thank You , for visiting with us, we will do our utmost to make your visit an enjoyable one.

LIABILITY RELEASE

We do release and discharge Newtown Square PRR Museum Association from any and all claims of liability or causes of actions in law and equity arising from our activities listed above on this form and on Newtown Township property.

Signature- Individual/Officer of Organization \_\_\_\_\_

Date \_\_\_\_\_

# Example Form



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
5/5/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b>  	<b>CONTACT NAME:</b> <b>PHONE</b> <b>(A/C No. Ext):</b> _____ <b>FAX (A/C No):</b> _____ <b>E-MAIL ADDRESS:</b> _____														
<b>INSURED</b>  	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC #</th> </tr> <tr> <td><b>INSURER A :</b> _____</td> <td>_____</td> </tr> <tr> <td><b>INSURER B :</b> _____</td> <td>_____</td> </tr> <tr> <td><b>INSURER C :</b> _____</td> <td>_____</td> </tr> <tr> <td><b>INSURER D :</b> _____</td> <td>_____</td> </tr> <tr> <td><b>INSURER E :</b> _____</td> <td>_____</td> </tr> <tr> <td><b>INSURER F :</b> _____</td> <td>_____</td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A :</b> _____	_____	<b>INSURER B :</b> _____	_____	<b>INSURER C :</b> _____	_____	<b>INSURER D :</b> _____	_____	<b>INSURER E :</b> _____	_____	<b>INSURER F :</b> _____	_____
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<b>INSURER C :</b> _____	_____														
<b>INSURER D :</b> _____	_____														
<b>INSURER E :</b> _____	_____														
<b>INSURER F :</b> _____	_____														

**COVERAGES** **CERTIFICATE NUMBER:** \_\_\_\_\_ **REVISION NUMBER:** \_\_\_\_\_

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> <b>OCCUR</b>  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ 1 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE  DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L EACH ACCIDENT \$ E.L DISEASE - EA EMPLOYEE \$ E.L DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Certificate holder is named as an additional insured by virtue of a written or oral contract or by the issuance/existence of a permit or certificate of insurance but only with respect to operations by or on behalf of the Insured, or to facilities of, or facilities used by the Insured and then only for the limits of liability specified in such contract for the event specified herein.

Event: \_\_\_\_\_

<b>CERTIFICATE HOLDER</b>  Drexel Lodge Park/ 4140 West Chester Pike Newtown Square, PA 19073	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE
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## Chapter 112: PARKS AND RECREATION AREAS

[HISTORY: Adopted by the Board of Supervisors of the Township of Newtown 6-10-1974 as Ord. No. 1974-5. Amendments noted where applicable.]

### § 112-1. Compliance required.

No person, firm or corporation shall use any park or recreational area owned, leased, maintained or operated by the township unless such person, firm or corporation complies strictly with the provisions of this chapter.

### § 112-2. Restrictions.

No person, firm or corporation using any park or recreational area owned, leased, maintained or operated by the township shall do any of the following:

- A. Build any fire anywhere in such park or recreational area except in fireplaces provided for such purposes. Such fires shall be guarded at all times and shall be extinguished before the person guarding the same leaves.
- B. Cut, mutilate or remove or destroy in any manner whatsoever any trees, shrubbery, flowers, plants or wood.
- C. Deface, mark, damage, remove or destroy any buildings, posters, fences, gates or guardrailings or any other park property in any manner whatsoever.
- D. Use intoxicating drinks or beverages or engage in intoxication or enter in an intoxicated condition and use indecent language, gamble or conduct himself in any disorderly manner.
- E. Be accompanied by dogs or permit the entry of dogs except when on leash.
- F. Litter grounds with refuse or place refuse and rubbish anywhere except in barrels and/or containers provided for that purpose.
- G. Park cars anywhere within such areas except in places designated for parking.
- H. Operate any motor vehicle at a speed in excess of fifteen (15) miles per hour or in any manner that evidences the lack of due care and regard for the safety of property or persons within such area.
- I. Use the park and recreational area at any time after sunset and before sunrise unless a permit is first obtained for an overnight camping privilege by application to the Township Manager or his designated agent.

- J. No organized group shall use the park or recreational areas unless a permit therefor is applied for and first obtained from the Township Manager or his designated agent.
- K. Operate any motor-driven vehicles, minibikes or motorcycles in any park or recreational area owned, leased, maintained or operated by the Township of Newtown. Entry and exit to designated parking areas will be permitted by properly licensed operators operating properly inspected and properly registered motor vehicles.

§ 112-3. Violations and penalties. [Amended 4-24-1995 by Ord. No. 1995-2]

Any person, firm or corporation violating any provision of this Article shall, upon conviction, be punishable by a fine not exceeding one thousand dollars (\$1,000.), plus costs of prosecution, and, in default of payment of such fine and costs, shall be imprisoned for a term not exceeding thirty (30) days.