



# SKIPPACK TOWNSHIP

www.skippacktownship.org  
4089 Heckler Road · P.O. Box 164  
Skippack, PA 19474  
PHONE: 610-454-0909 · FAX:610-454-1385

**Board Of Supervisors**  
Mark Marino –*Chairman*  
Mary Beth Labelle –*Vice Chair*  
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## Skippack Township Facility Reservation Form Skippack Township Department of Parks and Recreation

To receive confirmation of your reservation you must have this form filled out completely and returned to Tiffany Barker at [Parks@skippacktownship.org](mailto:Parks@skippacktownship.org) or mail to 4089 Heckler Rd, P.O. Box 164, Skippack, PA 19474. If you have any question please contact us at 610-454-0909.

Organization: \_\_\_\_\_

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

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

Phone Number #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Date(s) of use: \_\_\_\_\_ Start time: \_\_\_\_\_ End Time: \_\_\_\_\_

Number of individuals expected: \_\_\_\_\_

Please list the facility (ies) that is/are being requested. *(If reserving multiples please list the amounts of each you would like to reserve.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Equipment Available:

- Picnic Pack (Frisbee, Wifleball & Bat, Basketball, Kickball)
- Bocce Set

*When reserving a pavilion please check park equipment if so desired to guarantee its availability.*

*You may be asked to submit a copy of certificate of insurance, or sign a release form.*

*If an area is not reserved it is open to public use.*

### \*\*\*For Township Use Only\*\*\*

Permit #: \_\_\_\_\_ Date Issued: \_\_\_\_\_

Security Deposit: \_\_\_\_\_ Fee(s): \_\_\_\_\_ Total Collected: \_\_\_\_\_

Staff Authorization: \_\_\_\_\_

Date Inspection completed: \_\_\_\_\_ Condition: \_\_\_\_\_

Amount Returned: \_\_\_\_\_ Staff Signature: \_\_\_\_\_