

**Orwigsburg Borough Recreation Commission  
Memorial Building Request Form**

Phone: 570-366-3103 Fax: 570-366-3106 e-mail: [secretary@orwigsburg.gov](mailto:secretary@orwigsburg.gov)

**Your reservation is not official until form is submitted to the Borough Office  
@ 333 S Liberty St, Orwigsburg**

Date \_\_\_\_\_ Telephone Number \_\_\_\_\_

Name of Organization/Individual \_\_\_\_\_

Address \_\_\_\_\_

Activities Scheduled \_\_\_\_\_

Reservation Dates(s) Requested \_\_\_\_\_

Reservation Times(s) Requested \_\_\_\_\_

Actual Start & Finish Time of Event \_\_\_\_\_

Will You Require Use of the Kitchen? \_\_\_\_\_  
*(Please notify the Borough if you will need access to the oven and/or stove.)*

Will You Be Using the Bleachers? \_\_\_\_\_

Do You Have Any Other Special Arrangements, Requests, or Things We Should  
Know? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We/I Certify That We Are a \_\_\_\_\_ Non-Profit \_\_\_\_\_ Profit Organization

Will You Be Charging an Entrance Fee? \_\_\_\_\_

Are You Holding This Event for Profit? \_\_\_\_\_

Is the Group/Individual Covered by Liability Insurance? \_\_\_\_\_

If yes, what is the amount of coverage? \_\_\_\_\_ Note: The Borough must be provided with a certificate of insurance stating that a minimum of one million dollars coverage is held by the insured.

Note: Rosters showing names and addresses of all team members must be attached to this request form.

**Agreement with Orwigsburg Borough for Use of Borough Facilities**

The undersigned, for and on behalf of the organization and activity designated above, does, in consideration for the use of Orwigsburg Borough property and/or facilities agree that the said organization shall be responsible to the Borough of Orwigsburg for any damages, excess cleaning charges and/or any other property of the Borough which is destroyed or misused. The undersigned agrees to make payment in full to the Borough of Orwigsburg within thirty (30) days of receipt of an invoice for such damages or repairs. Further, the undersigned agrees to hold the Borough of Orwigsburg harmless from any liability for any personal injuries or property damages resulting from the aforementioned activities being held by the organization or individual.

Payment for scheduled events/activities is due and payable one (1) week in advance of the scheduled event and is not subject to refund. The undersigned also acknowledges that they will inform the Borough in writing of any changes and/or cancellations. See attached fee schedule.

For the Borough:

For the Organization:

\_\_\_\_\_  
Name (Signature)

\_\_\_\_\_  
Name (Signature)

\_\_\_\_\_  
Official Position

\_\_\_\_\_  
Official Position

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

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For Orwigsburg Borough Use Only:

Approved \_\_\_\_\_

Not Approved \_\_\_\_\_

-If any difficulties should occur please contact Steve @ 570-691-5457 or the Orwigsburg Police Department @ 570-366-3101 if no answer - County Comm Center @ 570-628-3792.