

2011

TOWN OF BEDFORD  
PLATFORM TENNIS COURTS  
REQUEST FOR STANDING RESERVATIONS

2012

The following individuals hereby request the establishment of the reservation (s) noted below for use by their playing group. We understand that this request is subject to the approval of the Superintendent of Recreation and Parks, and that the Superintendent reserves the right to approve, reject or cancel any reservation at any time as he determines to be in the best interest of the overall Town program.

**Primary Group Contact:**

**Date:** \_\_\_\_\_

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Work /Cell Phone** \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_ **Park ID** \_\_\_\_\_

**Additional Players in Group:**

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Current Park ID** \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Current Park ID** \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Current Park ID** \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Current Park ID \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Current Park ID \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Current Park ID \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Current Park ID \_\_\_\_\_ (yes) \_\_\_\_\_ (no)

# Facility Request

Bedford Village Memorial Park Courts \_\_\_\_\_

Katonah Memorial Parks Courts \_\_\_\_\_

1<sup>st</sup> Day Requested \_\_\_\_\_ Time: from \_\_\_\_\_ to \_\_\_\_\_

Dates: (list all that apply)

Oct. \_\_\_\_\_ Jan. \_\_\_\_\_

Nov. \_\_\_\_\_ Feb. \_\_\_\_\_

Dec. \_\_\_\_\_ Mar. \_\_\_\_\_

Apr. \_\_\_\_\_

2<sup>nd</sup> Day Requested \_\_\_\_\_ Time: from \_\_\_\_\_ to \_\_\_\_\_

Dates: (list all that apply)

Oct. \_\_\_\_\_ Jan. \_\_\_\_\_

Nov. \_\_\_\_\_ Feb. \_\_\_\_\_

Dec. \_\_\_\_\_ Mar. \_\_\_\_\_

Apr. \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Comments: \_\_\_\_\_

CC Parks Dept  
Police Dept  
File Copy

\_\_\_\_\_  
Superintendent

\_\_\_\_\_  
Date