

**Ardsley Community Education Center**  
2828 Spear Avenue, Ardsley, PA 19038  
Telephone: 215-576-1630

**FACILITY USE APPLICATION**

Name of Organization \_\_\_\_\_ Date \_\_\_\_\_  
Type of Organization \_\_\_\_\_ (non-profit, educational, civic, social,  
religious, service, recreational, political, private, commercial)  
Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
Person in Charge, Title \_\_\_\_\_  
Email Address \_\_\_\_\_

Facility Requested

Gymnasium	Art Room
Stage	Cafeteria
Reading Room	Field
Activity Room	Other

Equipment Requested

Chairs  
Tables  
Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Large Activity Room  
Special Considerations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Program Date(s) \_\_\_\_\_ Days of Week \_\_\_\_\_  
Hours \_\_\_\_\_ No. of Supervisors \_\_\_\_\_ No. of Participants \_\_\_\_\_  
Purpose (Be Specific) \_\_\_\_\_

Will an admission fee be charged? \_\_\_\_\_ If yes, state amount: \$ \_\_\_\_\_ per \_\_\_\_\_

What are proceeds to be expended for? \_\_\_\_\_

The program is open to:      the general public      an organizational membership

I hereby agree that I have read the rules and regulations attached to this application and agree to abide by the same and to leave the facility in a clean and orderly condition. **FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE.**

\_\_\_\_\_  
(Signature)      Date  
(If under 21, signature of parent or guardian)

NOTES: