



TOWN OF STONY POINT

RECREATION DEPARTMENT

19 Clubhouse Lane, Stony Point, NY 10980

845-947-5261

KNigro@townofstonypoint.org

REFERENCE SHEET

Please provide 2 references (no relatives)

Name: _____

Contact Phone Number: _____

Contact Email: _____

Relationship: _____

Name: _____

Contact Phone Number: _____

Contact Email: _____

Relationship: _____

Please remember the age appropriate working papers are required for employment for anyone 16-17-years of age. Please submit them with your application.