Goshen 2025

PARKING ON SITE

First Name

Applicant's Signature: ____
Secretary's Signature: ____

Secretary's Name: ____

Parking at the Goshen Center is limited. The expected attendance is 12,000, which far exceeds the parking capacity currently available. To park at the Center, you must obtain a Parking Pass by submitting the Parking Pass Application to your Secretary by *April 30th, 2025*.

Parking Passes will be issued on a first-come, first-served basis.

- 1. Family Area (with children ages 10 or less) -four (4) or more persons required per vehicle.
- 2. High Occupancy Vehicles (HOV) / Carpools five (5) or more persons required per vehicle.
- 3. Special Needs and Mobility-Impaired with a Special Needs Parking Pass please fill out the **Special Needs Application** and indicate that you require a Parking Pass. You **DO NOT** need to fill out this application.
- 4. All Others should ask for a Remote Parking Pass. Shuttles will take you to and from Satsang Hall.
- 5. If you are not associated with a Sangat/Center, please email this form to parkinggoshen@gmail.com.

Those receiving High Occupancy Vehicle (HOV) parking passes must arrive with five (5) or more persons. We also ask that those receiving Family Area Parking Passes and Special Needs Parking Passes arrive with full vehicles.

Those who do not get a Parking Pass for the Goshen Center are strongly encouraged to arrive by Charter or Hotel Shuttle Buses. Seating will be reserved for those arriving by bus.

Remote Parking will be on grass fields and will require walking some distance to Shuttle Buses. This may be difficult in rainy weather.

A Parking Pass is not required for Sunday, July 27th, 2025.

For any inquiries, please call (845) 801-0291.

Additional information about parking will be published on www.goshenprogram.org as it becomes available.

APPLICANT INFORMATION DEADLINE: APRIL 30TH, 2025

PARKING PASS APPLICATION – PLEASE PRINT CLEARLY

1 11 0 1 1 1 1 1 1 1 1					om gar man						
Last Name					Telephone						
Address					Email						
City					State		Zip				
Parking Designation (select only ONE):					Hotel Information:						
Onsite		A. Family Area			Are You staying in a	hotel? Yes 🗆 No					
	В	B. HOV-5 (vehicles with 5 or more)			Name of Hotel						
C. Remote Parking					City						
<u> </u>											
Total number of passengers in your vehicle.					Parking Pass required for:						
Of those, how many are children in strollers?					Friday, July 25th		Saturd	ay, Jul	y 26th		
By signing this application form I consent to processing by RSSB-A, RSSB and Science of the Soul®-America and its affiliated societies of the personal data on this application form, to the use of this data to the extent necessary to achieve the purpose of this application and consent to receive email (Please refer to the privacy policy concerning personal data at www.rssb.org). Also, my signature indicates my AGREEMENT to the rules and policies regarding this event:											

_____Contact Information (phone or email): ____

Center/Sangat Name

Date: ___