

TOWN OF HOLLISTON PARK COMMISSION

Field Request Form

Organization: _____ Contact Person: _____
Address: _____ Town: _____ Zip: _____
E-mail: _____ Cell/Daytime Telephone: (____) _____

Name of Field: _____
Field Use: _____
Event/Activity: _____ What Sport? _____ Games: _____ Practices: _____

What size field is needed? _____ Will you need it to be lined? _____

Dates: _____

Times: _____ Estimated Attendance: _____

Public Address Systems need to be approved on a case by case basis. Please check here if you would like to use a PA system. (We do not supply PA systems.) _____

Lights for Adams & Damigella Fields require a separate Request Form.

Bathrooms (Stoddard or Goodwill available May 1- Sept. 30): Yes _____ No _____
(Resident/Non-Resident \$35/\$40 per day or \$100/\$110 per week)

	Athletic Field per hour	Kamitian Turf Field per hour*	Bathroom per day/week
In-Town Non-profit	\$20	\$25	\$35/\$100
In Town For Profit	\$25	\$50	\$35/\$100
Out of Town Non-profit	\$30	\$75	\$40/\$110
Out of Town For-profit	\$35	\$75	\$40/\$110

Having read the terms listed in the Field Policy and Field Information, I agree to abide by those terms. It is understood that failure to abide by this agreement could result in the revoking of our permit and future use of Holliston Fields.

The applicant agrees to be the responsible person to see that all Park Department rules and regulations are followed and that the facility is left in a neat and orderly manner. Failure to use and leave the facility as agreed will result in no future applications being accepted from your organization.

In consideration of the use of the above referenced facility, the applicant agrees to remise, release and forever discharge the Town of Holliston of and from all debts, demands, actions, causes of action, suits, accounts, covenants, contracts, agreements, damages and any and all claims, demands and liabilities whatsoever of every name and nature both in LAW and EQUITY, which against the said Town of Holliston now have or ever had, more especially on account of theft or damage of personal property, or injury sustained while using the facility.

Applicant's Signature: _____ Date: _____
Applicant must be over the age of 21 years to request a field. ID may be required.

NO ALCOHOLIC BEVERAGES ALLOWED AT ANY TOWN FACILITY

Insurance Certificates are needed for any sports event/league or activities or large gatherings of people.

For applications, field rules and information, visit our web site at www.townofholliston.us/park.htm

Applications should be mailed to: Holliston Parks & Recreation Dept.,
1750 Washington St., Holliston, MA 01746 Phone: 508-429-2149 fax: 508-429-0696

Field requests must be submitted one month in advance of requested use date. 1/6/16