

Town of Leicester Leicester, MA 01524-1333

Leicester Fields and Facilities Request Form

Name of Organization:	Contact Name:	
Address		
Contact Phone #	Email address:	
Field or Facilities to be used:		
Date(s) desired:		
Time(s): From:a.m./p.m.	To:a.m./p.m. (include prep time-clean up time)	
Purpose for use:	admission charge if appl	
Alternate Field or Facilities that could be use	d:	
Is your group a town organization? YES I	NO Is your group a nonprofit organization? YES NO	
	Review and Sign Below	
read the policy governing the use of town fid with it in full. I understand further that shou denied. I also understand that should the fid be assessed and due in full prior to any subs	as official representative of the organization named elds and facilities, and am empowered to guarantee that this organization all the policy not be adhered to, permission to further use the fields or facilities, grounds, or facilities not be left in the condition to which they were frequent approvals. The field and facilities committee reserves the right to compod cause. I have received and read a copy of the Leicester fields and rental/use agreement.	will comply cilities may be ound, a fee will deny or rescind
Signed:	Title:	
l,	will provide the Town of Leicester with a Certificate of Insurance.	
All spring sport requests must be made by N	larch 1 st . All Fall sports requests must be made by August 1 st .	
Organizations should list games time and pr	actice times separately.	
bases, and tools, shutting of any lights used, surcharge, for the 1st offense, \$ 75.00 surchat the next scheduled use. All field cancellathours prior to scheduled time. Failure to do caused by cancellations or playoffs, will be good Submit application and checks to: Recre	eational Field Organizer Town of Leicester, 3 Washburn Square, Leicester,	\$ 50.00 ble loss of use eduler 24 ent needs,
Contact the RFO via Email at §	chedule@leicesterma.org or (999)999-9999 with any questions.	
Group Category:	Total Cost for this use of field/facility is:	
Scheduler Signature:	Date:	
Field/Facilities Rep. signature:	Date:	
Remarks:		
	FOR OFFICIAL USE ONLY	