TOWN OF WESTFORD PARKS, RECREATION DEPARTMENT

ADULT USER GROUPS FIELD USE APPLICATION

PLEASE PRINT

ORGANIZATION NAME:		ERSON IN CHARGE:						
ADDRESS:	TOWN:		ZIP CODE:					
BEST NUMBER TO REACH YOU:	HOME#	WORK#	CELL#	_				
EMAIL: Additional contact email for field closure notification:								
NAME & CELL PHONE # OF PERSON ON SITE								
DATE(S) REQUESTED: from	toTIME OF I	DAY:	DAY(s) OF WEEK					
CHECK FIELD SITE(S) REQUESTED)							
American Legion Field	_Capt. Stephen Hamilton F	ieldCameron I	FieldFrost Field					
GreystoneJack Walsh	VFW Baseball _	VFW Softball						
Community Fields @Nutting Road	Field #1 – front	Field #2 – back						
SPECIFY FIELD SIZE/ SPACE		NUMBER OF FIEL	DS_					
Seasonal o	or multiple use permit requ	iests must include a sch	edule.					
This permit grants the above-named application conducting recreational activities. I acknow pursuant to this permit and that I am responsible rules and regulations of the Town of W	vledge that I am solely responsisible for ensuring that said use	sible for ensuring the safety e is in accordance with all a	of those using the Town's property pplicable laws, including but not lin	nited-to				
The permit holder agrees that no person shall be permitted to participate in activities pursuant to this permit unless and until they have executed the attached Release of Claims, Indemnity and Hold Harmless Agreement.								
I understand the Town of Westford By-laws prohibits the use or possession of drugs and/or alcoholic beverages on Town property without permission and that this permit does not grant said permission.								
I certify that a league representative or I will be present at the site during all activities associated with this permit application. I as the organization representative assume responsibility for the conduct of the group and for the condition of the area upon our departure.								
I have read the Standard Conditions and will make players, coaches, league officials, and spectators aware of this information.								
SIGNED		DATED						
4. Primary User Alliance, 25. Camps/Clinics \$1,000/u	rd Business \$100/game; atting Road: Resident \$8 Non-resident youth \$100 p to 5 days for <50 camp to 5 days for <50 camp	60/hr, non-resident \$12/ /game pers; <u>>50</u> Additional pers; <u>></u> 50 Additional \$	20/hr \$10/camper (Jack Walsh) 510/camper (Nutting Road)					
FOR OFFICE USE ONLY: PERMIT:GRANTEDDENIED_ PAYMENT RECEIVED: CHECK #		PERMIT#	SEASON	2020				

STANDARD CONDITIONS

Field Safety Information

- 1. Coaches must walk the fields and surrounding area prior to use. A potential hazard must be reported to players, opposing team, and officials. Report hazards within 24 hours to the Parks and Recreation Director (978) 692-5532 and to League Officials.
- 2. Serious injury that requires a doctor, hospital, or ambulance shall be reported in writing to the Parks and Recreation Department within 24-48 hours. Report forms are available from the department and on-line
- 3. Closed fields may not be used for any reason. Use of a closed field jeopardizes the safety of all and will require additional maintenance to restore the field to safe conditions.
- 4. A field that is saturated (water logged and feels like walking on a wet sponge) or has standing water in the playing area—should be closed by coaches to avoid damage. If a footstep leaves an impression on the turf, or if—the grass is removed easily with a cleat, the field is considered wet and should be close until conditions change.
- 5. Frost on the field field should not be opened until frost has melted.
- 6. Fields should be closed under any of the following conditions: lightening, heavy rain/downpour of rain, thunder, or severe weather warnings, other conditions that present safety concerns for users/spectators.
- 7. Field is frozen = field closed
- 8. Field should be closed when the footing is unsure and or slippery.
- 9. Coaches and leagues are not allowed to do any maintenance work on wet fields. Do not brush water off water/clay onto grass areas. This creates a major and unnecessary problem maintaining the grass around the base areas. The clay settles in the grass creating an uneven base path or lip resulting in a potential tripping hazard.
- 10. Soft toss/batting practice and/or kicking against fences is not allowed.
- 11. Trash and Recycling
 - Upon completion of a game or practice, the group/team coaches are responsible for the proper removal and disposal of trash associated with their use of the property. All fields and bench areas should be left clean at the end of each use.
- 12. Blocking of Emergency Access entrances is strictly prohibited.
- 13. COMMUNITY FIELDS AT NUTTING ROAD
 - Due to the nature of synthetic turf and its recovery ability the Community Fields at Nutting Road may stay open when the grass fields are closed. They will be closed if snow covered and permit holders are not allowed to remove snow from any field. The field is closed with standing water until it has drained, and surface has dried.
 - No beverages /drinks other than plain water allowed on the synthetic turf fields
 - No food is allowed on the synthetic turf fields
 - No dogs allowed on synthetic turf
 - No chewing gum or similar substance is allowed as gum may damage the synthetic turf.
 - No staking of any object into the synthetic turf.
- 14. All the recreation fields are located in residential areas. Please be respectful of neighbors and the

neignborhood.	CHECK LIST FIELD PERMITS APPLICATION REQUIREMENTS
	COMPLETED & Signed Field Permit Application ATTENDEE ROSTERS
	WAIVER RELEASE FORMS per each participant SUBMIT PAYMENT

<u>Completed Forms can be sent via email, fax, mail or hand delivered using the following contact information:</u>

Westford Parks & Recreation Department, 65 Main Street- 3rd Floor, Westford, MA 01886

JFelicani@WestfordMA.Gov

Fax: (978) 392-4471

Release of Claims, Indemnity and Hold Harmless Agreement

I,, in con	sideration of the opportunity to participate in a sporting
event or other recreational activity at the Town's fields (the lany employees, agents, officials, representatives, officer associates of any status, and volunteers of the Town of We actions, causes of action, demands, damages, costs, loss of sas the result of my participation in the Program and all participation in the program is voluntary and may expose menter this program assuming all risk of injury to my person of and in this regard, assume and agree to pay all medical correleasing the Town of Westford and any employees, agents, members, sponsors, agents, associates of any status, and volcaims, damages, injuries or causes of action which I or m Furthermore, I hereby agree to protect the Town of Westford officers, employees, servants, attorneys and agents against arising out of or resulting from any injury to any party in corporate and to INDEMNIFY, reimburse or make good to committees, boards, officers, employees, servants and agents which the Town of Westford or its representatives may haparticipation in the aforementioned activities.	estford, of any and all liability for any and all claims ervices, expenses and compensation which I may have activities related thereto. I further acknowledge that e or my property to risks of personal injury. I therefore property arising from my participation in the Program osts or property damage costs occasioned and thereby officials, representatives, officers, committees, boards funteers of the Town of Westford from and against ally heirs, executors, or administrators may have hereined and its successors, departments, boards, committees any claim for damages, compensation or otherwise onnection with my participation in the aforementioned the Town of Westford or its successors, departments any loss or damage or costs, including attorneys' fees
I hereby further covenant for myself, my successor its departments, officers, employees, servants, attorneys, a liability.	s and assigns not to sue the said Town of Westford, on a agents, on account of any such claim, demand on
I am fully aware that by signing this document I a that may arise as a result of intentional or negligent acts of t above mentioned parties from liability relating to any accide while participating in the Program.	• •
Witness my hand and seal thisday of	<u>, 20 . </u>
Program Participant (Signature)	Program Participant (Printed)
Witness	