



TOWN OF DUXBURY
Recreation Department
878 Tremont St.
Duxbury, MA 02332
781-934-7034 Fax: (781) 934-1110

Application for the Use of Recreation/School Fields

Name of Organization/Individual: _____ Program Coordinator: _____

Mailing Address: _____
Street Address City State Zip

Home Phone: _____ Cell Phone: _____

Email Address: _____ Is your group? Profit ☐ Non-Profit ☐

Will admission/fee be charged: Yes ☐ No ☐ Number expected to attend? _____

Mandatory: For all Youth Organizations: Attach a certificate of insurance showing general liability coverage and naming the Town of Duxbury as an "additional insured party".

Mandatory: For all Youth Organizations: ☐ I certify that our organization is C.O.R.I. certified and that all volunteers have been CORI checked as required by MA state laws. (Chapter 385 of the Act of 2002-Sec 172H)

Signature of Organization's President: _____

Type of Activity or Program _____ Will Lights Be Used? ☐ Yes ☐ No

Name of Field: _____ Starting/Ending date of season: _____

Times Requested:	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
From:							
To:							

I, _____ as Program Coordinator, have fully read the field rules and regulations provided to me by the Duxbury Recreation Department. During the time of the use of the field, I agree that all persons associated with my organization shall abide by all the rules and regulations. I also agree that failure to abide by these rules will result in the immediate revocation of permit from the Duxbury Recreation Department. I/We assume all risks and hazards incidental to such participation including transportation to and from the activities; I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the Town of Duxbury, Recreation Department, the Department of Public Works, its servants and employees for any injury or loss of property that may be incurred by anyone using Town facilities.

Authorized Signature _____ Date _____

*** Not Write in Box Below * FOR OFFICE USE ONLY***

☐ Approved ☐ Declined

Approved as Requested Unless Noted Below:

Recreation Director _____

<input type="checkbox"/> Insurance Certificate Received	Duxbury Youth League Permit Fee @ \$7 per registrant	\$ _____
<input type="checkbox"/> 501C-3 Received	Light Fee @ \$45 per hour	\$ _____
<input type="checkbox"/> Payment Received	Private Group fee	\$ _____
<u>TOTAL DUE:</u>		\$ _____