

Athletic Facility/Town Green Permit Request Form							
Note: Please fill out a separate	form for each µ	oark					
Organization Name:						Sport:	
Name of Applicant:							
Address:							
Town:				State	:	-	Zip:
Daytime Phone #:				_	Evening	Phone #:	
Email:					_		
Number of Participa	ints in your l	Program:		_	Purpose:		
Type of Field Requested:				_			
Park Requested Please Circle all that apply	PARKS	Bliss	Greenwood	Laurel	Turner	Wolf Swam	p Fields Strople DiPippo
	SCHOOLS	Blueberry	Glenbrook	High School	Russell	Williams	Wolf Swamp School
l	Town Green						
Dates Required:	Start Date:			-	End Time.		
Days Required: Please Circle all that apply	Monday Tues	day Wedn	esday Thurs	day Friday S	Saturday S	unday	
Times Required:	Start Time			_	End Time		
Field Dimensions:	Legnth:			Width:	·		-
Do you have Insurance? (If yes, please answer below)	Please Check			Yes		No	
	What Type?						
	Total amount o	f Liability co	verage:				
What Associations do you	i belong to?						
Comments:							
Agreement:	If approved, my Longmeadow, I	/ signature ir Parks and R	ndicates that I ecreation Dep	will abide by a partment and s	Il rules, polic pecific to my	cies, procedure v permit.	s and requirements of the Town of
		Signature				-	Date
Official Use Only		Approved			Denied		
	By:	:					Date:

Passionate Professionals, Beautiful Parks and Exceptional Experiences