



Williston Recreation & Parks

FIELD/FACILITY PERMIT APPLICATION

Today's Date: _____

Organization/Team/Business/Individual: *(All Information needs to be complete, specific and accurate)*

Organization Name:	Organization Phone:
Address:	Town, State, Zip
Contact Name:	Cell Phone:
Email Address:	Home Phone:

Park Facility Requested: *(for multiple dates attach a schedule or list dates on separate sheet of paper)*

Type of Event: <i>(check off those that apply)</i> Practice Game Tournament Camp Other: _____	
Type of Field/Facility Requested: <i>(check ones that apply)</i> <i>How many of each needed? (place number needed next to the type)</i> Soccer: (U10 U12 Regulation) Baseball: (Softball Babe Ruth Little League) Lacrosse: (Full Half) Other: _____	
Location of Facility Requested: <i>(check ones that apply)</i> Williston Community Park Allen Brook Community Park Brennan Park Rossignol Park Other: _____	
Date(s) Requested: From: _____ To: _____ From: _____ To: _____ From: _____ To: _____ From: _____ To: _____	Time of Day Requested: From: _____ To: _____ From: _____ To: _____ From: _____ To: _____ From: _____ To: _____
Day(s) of Week Requested: _____	Estimated Number of Cars: _____
Estimated Number of People: Total Number: _____ # of Youth: _____ # of Adults: _____ # of Residents: _____	
Additional Comments or Requests: 	
Applicant's Signature: _____	Date: _____

Signatures also required on the back or second page of this document- Release & Waiver

*Application must be submitted a minimum of Two Weeks prior to scheduled event.
Return completed form to Recreation & Parks, 7900 Williston Road, Williston, VT 05495*

FIELD/FACILITY USE RELEASE & WAIVER

We understand and agree to the following:

- Submission of an application does not guarantee acceptance.
- Permission to use a park facility will be granted to persons twenty one years of age and older.
- The Recreation and Parks Dept reserves the right to deny permission for an event if it is seen as potentially causing detriment to the facilities.
- Denial of a Permit may be appealed to the Williston Recreation Committee.
- The permit holder must be present at all times and have the permit on their person.
- They must show it upon request from a representative of the Town of Williston. (police, fire, recreation, etc.)
- The group must provide trash removal, at the expense of the user group, of 75 or more people or a tournament type activity. Groups will supply their own trash removal; extra bins, dumpster, hauling away trash.
- The group must provide portable restroom facilities, at the expense of user group, of 75 or more people or a tournament type activity.
- The group and participants are restricted to the designated are of use, within the time frame listed.
- The permit holder is responsible for the actions of all persons using the park facility on this permit.
- It is the responsibility of the permit holder to inform all members of their group of the rules and regulations.
- Unruly behavior may result in immediate cancellation of the permit and/or future use of fields/facilities.
- Permits are not transferable. The facility is to be used only by the group permitted for, and for the purpose stated, and on the date on the permit.
- A specific day, date and time, on the permit, may be cancelled if the facility is needed for a recreation program, town event or school function. Advanced notice will be given to the contact person.
- The permitted group must notify the Recreation & Parks Dept of any and all times that the facility will not be used. Weather cancellations exempted.
- Any costs incurred by the town in preparation for any activity/event or after such activity/event will be charged to the user group.
- If any damage occurs to a Town facility as a result of a group's use, it will be paid by the contact person for that group.
- The permit holder will comply with ADA requirements, and will make programs accessible for those who require special assistance.
- Individuals or groups reserving the fields for use must provide the Williston Recreation and Parks Department with a Certificate of Insurance as proof of a Comprehensive Liability Policy naming the Town of Williston, as an additional insured party, from the loss or liability arising from their sponsored activities. The limits of the Comprehensive Liability Policy should be no less than One Million dollars (\$1,000,000) per person and One Million dollars (\$1,000,000) per occurrence.
- No Permit will be issued until the Certificate of Insurance is received by the Williston Recreation and Parks Department.

ACKNOWLEDGE OF UNDERSTANDING, being a duly authorized representative of the organization requesting field use and or a facility with the Town of Williston, I acknowledge that I have read and understand the above list of conditions, and agree to inform my users and abide by the said conditions.

Signature _____ **Date** _____

LIABILITY RELEASE

IN CONDISERATION, of permission granted to use by the Town of Williston to use hereby and forever discharge and release the Town of Williston, its agents, employees and officers, from all actions, claims, demands, judgments and damages which we, or any of the participants in our program or group, may have, or claim to have, or acquire in the future, for all personal injuries, or damage to property, rising out of our organization's use of the permitted facility.

WE ACKNOWLEDGE, that we have total responsibility for the program and our group and for the safety of all its participants. In addition, we acknowledge that the Town of Williston has no responsibility for the condition of the facility, be it a building, room within a building, field or open space, and that a supervisor from our organization shall always inspect the premises prior to use to ascertain that the premises are in safe and useable condition. We further acknowledge to the Town of Williston that our organization or group has adequate liability insurance, and that such insurance protects the Town of Williston to the extent of its interest. We further acknowledge that a Certificate of Liability Insurance will be provided to the Town of Williston, naming the Town of Williston as the Certificate Holder and as Additional Insured under the policy. This will be sent to the Recreation Department prior to being issued a permit.

IN WITNESS WHEREOF, the undersigned, being a duly authorized representative of the above-named organization has executed this release on the day and year first above-written.

Signature _____ **Date** _____

TITLE II-ADA: (Americans Disability Act) - Note: Title II of the ADA prohibits the Town of Williston from providing support including facilities to any organization which discriminates on the basis of disability. We agree that while we use the Town of Williston's facilities, parks, fields, and buildings for practice, games, tournaments, meetings and other such events, that we will not discriminate on the basis of disability.

Signature _____ **Date** _____

Recreation Department Use Only:

Action:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Reason denied: _____
Field/Facility Assigned:	_____ Condition of Use: _____		
Certificate of Insurance Received:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Permit Issued: <input type="checkbox"/> Yes <input type="checkbox"/> No
Invoice Issued:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Fees Assessed:	<input type="checkbox"/> Per Policy	<input type="checkbox"/> One Time Fee \$ _____	Invoice Paid: _____