

**MEREDITH PARKS & RECREATION OUTDOOR FACILITY USE PERMIT
 MEREDITH COMMUNITY CENTER
 ONE CIRCLE DRIVE, MEREDITH, NH 03253**

Telephone: (603) 279-8197 Fax: (603) 556-8821 www.meredithnh.org

NAME OF ORGANIZATION: _____

MAILING ADDRESS: _____

DATES REQUESTED: _____ TIME: _____

BEACHES & PARKS

- ___ Waukewan Highlands
- ___ Swasey Park
- ___ Hamlin Recreation Area
- ___ Leavitt Beach
- ___ Waukewan Beach
- ___ Childs Park
- ___ Circle Drive Park

LOWER PRESCOTT PARK (map on back)

- ___ Ball Field #1 (Little League, with fence)
- ___ Ball Field #2 (Little League, without fence)
- ___ Ball Field #3 (90' bases, next to batting cage)
- ___ Soccer Field A (Next to basketball court)
- ___ Soccer Field B (Next to dirt road)
- ___ Pa Smith Building (Building #1) (Next to Rte. 3)
- ___ Block Building (Building #2) (Next to Skate Park)
- ___ Skate Park
- ___ Ice Skating Rink
- ___ Basketball Court
- ___ Batting Cage

UPPER PRESCOTT PARK (map on back)

Parking for Upper Prescott Park is located at ILES & ILHS; fields can be accessed by the North & South Trails.

- ___ Ball Field #4
- ___ Soccer Field C (Regulation Size)
- ___ Soccer field D (Youth Size)
- ___ Tennis Courts 1 2 3 4 5 6 (Check off applicable courts)
- ___ Building #3 (Next to tennis courts)

PROGRAM DESCRIPTION: _____

Number of people expected: _____ Approximate number of cars to be parked: _____
 Will it be open to the public? _____ Are participants/spectators charged admission? _____

Do you request to place any of the following items on site? ___ sign - size _____ banner - size _____
 booth-size _____ trailer-size _____ tent - size _____ other _____

*Note: Signs may not be hung for more than 7 days. All requested items listed above must be removed the day after your event unless specified otherwise. We reserve the right to charge for the removal of any of the above-mentioned items that are not removed by the specified date on this permit.

Do you request the use of any of the following? Water electricity restrooms (if available)
 other _____ *Note: a fee may be charged for exceptional utility usage.

SCHEDULING PRIORITIES BY TYPE OF ORGANIZATION (PLEASE CHECK ONE):

- ___ #1 Town of Meredith
- ___ #2 Meredith Non-Profit
- ___ #3 Private Meredith Resident
- ___ #4 Meredith for Profit
- ___ #5 State of NH/Federal Agency
- ___ #6 Non-Meredith Non-Profit
- ___ #7 Private Non-Meredith Resident

ORGANIZATION TYPE

#1	#2	#3	#4	#5	#6	#7
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FACILITY HOURLY RATES

FACILITY	#1	#2	#3	#4	#5	#6	#7
Athletic Field	0	0	10	15	15	15	20
Athletic Field w/Lights	0	0	15	20	20	20	30
Skate Park	0	0	10	15	15	15	20
Skate Park w/Lights	0	0	15	20	20	20	30
Leavitt/Waukewan Beach	0	0	10	15	15	15	20
Tennis Court	0	0	10	15	15	15	20
Tennis Court w/Lights	0	0	15	20	20	20	30
Skating Rink	0	0	10	15	15	15	20
Skating Rink w/Lights	0	0	15	20	20	20	30

ADDITIONAL COMMENTS FROM APPLICANT:

Please provide us with your organization's certificate of insurance.

ALL TOWN FACILITIES ARE ISSUED BY PERMIT. USER GROUPS MUST HAVE A COPY OF THEIR PERMIT ON HAND DURING SCHEDULED EVENT.

STATEMENT OF LEGAL RELEASE

I/We _____ of the _____ agree to hold harmless the Town of Meredith, Parks and Recreation Department, commissioners, staff, volunteers, coaches, and instructors for accidents that may result for the entire program/event. The requesting organization assumes any and all responsibility when using the facility for special use and will see that the facility is cleaned and made presentable before leaving the premises and will immediately report any damages.

No vehicle traffic is permitted on the grass areas of park grounds without special request. The Town of Meredith reserves the right to bill your organization for any unforeseen expenses or damages to our property. NO alcoholic beverages are permitted on town property.

I HAVE READ THE ABOVE INFORMATION AND UNDERSTAND IT IN FULL. I UNDERSTAND THAT THE POLICIES ARE STRICTLY ENFORCED.

Signature of Authorized Agent

Telephone #

Date

Special Notes:

FOR OFFICE USE ONLY

REQUEST GRANTED _____	_____	_____
REQUEST DENIED _____	PARKS & RECREATION ADMINISTRATION	DATE
RENTAL CHARGE _____		
UTILITIES CHARGE _____		
ADDITIONAL INFORMATION REQUIRED _____	RENTAL FEE PAID: _____	
	BALANCE DUE: _____	
PARKS & RECREATION ADMINISTRATION COMMENTS:		

Note: Restrooms are available in Building #2 and Building #3.



