



**TOWN OF ACTON
RECREATION DEPARTMENT**

Mailing Address:
472 Main Street
Acton, Massachusetts, 01720

Recreation Department Location:

50 Audubon Drive
Acton, Massachusetts, 01720
Telephone: (978) 929-6640
Fax: (978) 929-6333
E-mail: recreation@acton-ma.gov
Website: www.actonrec.com

2019 APPLICATION FOR USE OF RECREATION FACILITIES

Complete Sections I & II only, signature required on page 2. File application with the Acton Recreation Department at least **TWO WEEKS prior to the date desired.** Adult and Youth Organizations must provide a current Certificate of Liability Insurance and sign the Acton Recreation Field Use Permit and Weather Policy (available online or at the Rec. Dept.) for a Field Permit to be granted. Incomplete applications will be returned. **Please allow up to two weeks for your application to be processed. Upon approval of application, you will be contacted via email first,** payment is due to secure your facilities rental and permit will be issued.

SECTION I

Application Date: _____ E-mail Address: _____
Name of Organization: _____
Contact Person: _____ Phone: Home (_____) _____
Address: _____ Cell: (_____) _____
Town/City: _____ State: _____ Zip Code: _____
Organization: Acton Non- Resident Number of Participants: _____
Describe Activity: _____

SECTION II

DATE REQUESTED: We do not offer rain dates; you must request an additional permit for requested alternate date. Setup and cleanup must be performed within the specified start and end times requested.

1st Choice _____ Time Requested: Start Time: _____ End Time: _____

2nd Choice _____ Time Requested: Start Time: _____ End Time: _____

FACILITY/ FIELD REQUESTED: (PLEASE CHECK)

NARA Park (25 Ledge Rock Way):

- ____ Amphitheater
- ____ Walking Trail (1 mile)
- Full Pavilion (20 picnic tables) _____
- Wing #1 (Closest to playground) ____ Add Dancefloor ____
- Wing #2 (Closest to pond) ____ Add Dancefloor ____
- ____ Bathhouse Pavilion (8 picnic tables)
- ____ Patio Tent (4 picnic tables)
- ____ Picnic Pod (2 picnic tables)
- ____ Picnic Tent on Fields (4 picnic tables)
- ____ Group Swim Passes (min. 10), # needed: _____
- ____ Soccer/Lacrosse Fields, # fields: _____
- ____ Miracle Field
- ____ Softball Field
- ____ Volleyball Court, 1 or 2 (Please Circle)
- ____ Gaga Court

Elm Street Fields (21 Elm Street):

- ____ Picnic Shelter
- ____ Soccer Field
- ____ Softball Field
- ____ Tennis Court, 1 or 2 (Please Circle)

Concord Road (104 Concord Road):

- ____ Soccer Field

School Street Fields (343-347 School Street):

- ____ Cricket Field, 1 or 2 (Please Circle)

Veterans Fields (655 Main Street):

- ____ Little League Fields, 1 or 2 (Please Circle)

Great Hill (54 School Street):

- ____ Small Soccer Field, 1 or 2 (Please Circle)

Hart Field (80 Taylor Road):

- ____ Little League Field

MacPherson Field (80 Taylor Road):

- ____ Little League Field

Jones Field (54 Martin Street):

- ____ Full Size Baseball/Lacrosse/Football Field

Robbins Mill Recreation Area (61 Canterbury Hill Road):

- ____ Small Soccer Field
- ____ Basketball Court
- ____ Picnic Shelter

Other:

- ____ Morrison Farm ____ Goward Field
- ____ Ice House Pond ____ Gardner Field
- ____ Skate Park ____ Other (please list)

* The NARA Picnic Areas are not available for rental during the NARA Summer Camp hours (7:30 AM – 5:30 PM, Monday-Friday, excluding Thursdays from June 24 – Aug. 30, 2019). Permits will not be available at NARA Park during our Independence Day Celebration, and dates that have sponsored recreation events.

Will Food/Beverages be Served? _____ If Yes, be specific _____

Will Alcohol be Served? ** _____ If yes, has a permit been obtained by the Board of Selectmen? _____

**A separate application and fees for liquor license is obtained through the Town Manager's Office (978-929-6611)—please note this application is filed with the Board of Selectmen and is needed no less than one month prior to your event.

Picnic table availability is noted for each area. Additional tables are not provided by the Town of Acton.

You must obtain permission to bring a propane grill. NARA Park bathrooms are open during normal beach operation hours. Portable toilets are onsite by the volleyball courts and upper parking lot.

CANCELLATION POLICY: If you cancel a facility/field reservation, you get a 50% refund; if less than 30 days notice, no refund will be issued. Group swim passes are not refundable. Refunds are not issued due to weather related conditions.

The Lessee or user of the facility/field will hold the Town of Acton and all its agents harmless from any problem resulting from the leasing or utilization of the premises. The Town of Acton reserves the right to cancel any permission, whenever, in its discretion, such cancellation seems advisable, and permits are subject to change. Picnic tables available are noted on form, additional tables needed are the responsibility of the renter.

(Representative's Signature)

(Date)

**SECTION III
For Office
Use Only**

REQUIRED SERVICES ASSIGNED:

_____ Fire – All commercial use of propane tanks need permit. (Over 50 gallons)
Contact the Acton Fire Dept. 978-929-7722

_____ Police

_____ Health Department Permit (Obtained at the Board of Health-separate fee with BOH) 978-929-6632

_____ Swimming—all group swim passes must be purchased in advance (min. 10). Additional passes may be purchased at the group rate onsite if permit holder has received permission in advance from Recreation Coordinator.

_____ Portable Toilets Required Location Required: _____

_____ Dumpster Required

_____ Liquor License (see Section II) Approved Denied

ESTIMATED RENTAL FEES:

Bldg. Rental \$ _____

Field Rental \$ _____

Swimming Fee \$ _____

Electrical Fee \$ _____

Security Deposit (required) \$ _____

PERMIT FOR USE OF RECREATION FACILITIES:

() THIS APPLICATION IS APPROVED FOR USE OF FACILITIES AS SCHEDULED.

() THIS APPLICATION IS DENIED FOR THE FOLLOWING REASONS: _____

Permit Issued By: _____

Recreation Department Signature

_____ Date

Special Instructions: Please bag and bring all trash to the dumpster by the volleyball courts at the end of your event.

Time indicated on the permit includes set-up and clean-up.

COPY TO:

_____ Grounds (Shawn O'Malley)

_____ Police

_____ Health Department

_____ Fire

_____ Finance

_____ Authorized Rep.

_____ Town Manager

_____ Park Ranger

Office use only: Application Received on: ____/____/____ By: _____	
Application Approved / Denied on: ____/____/____ Withdrawn on: _____	
Applicant Contacted on: ____/____/____ By: Phone Email Mail Office	
Second Contact on: ____/____/____ By: Phone Email Mail Office	
Payment by: Cash Money Order Check #: _____	
Amount Paid \$ _____ Date Paid ____/____/____ Received By: _____	