

Bethany Parks & Recreation Department

40 Peck Rd Bethany, CT 06524
Phone: 393-2100 x127 Fax 393-0821

ATHLETIC FACILITY/FIELD APPLICATION FORM

Applicant/Organization: _____ Date of Application: _____

Representative: _____ Phone: _____

Address: _____

Do you have Liability Insurance? _____ Does League require insurance? _____

**Please attach a copy of the insurance form.*

Organizations participating in an organized league, please forward your complete home and away schedule (as soon as it is finalized) to the Bethany Parks & Recreation Department.

Number of participants from Bethany: _____ Number of Participants from out of town: _____

Facility/Field(s) to be used for:

- Baseball/ Softball Football Lacrosse Soccer
 League games' Practice Recreational game Tournament
 Other (please specify): _____

Airport

Soccer Field(s)

Hoppe/Cofrancesco Field

Softball Diamond Baseball Diamond

Town Hall

Softball Diamond Field Gym Voting Room

Bethany Community School

Tennis Courts

Veteran's Memorial Park

Soccer Field(s) Lake Picnic Area Volleyball Court

Special equipment desired: _____

Date(s) to be used: From _____ to _____ Starting time and dates of scheduled events: _____

Special Permit Required for:

- Attendance greater than 200 people Food service or sale – Quinnipiack Valley Health District
 Attendance greater than 500 people Tent(s)
 Sale or consumption of alcoholic beverages Generator
 Camping / Cookouts Lifeguards
 Picnics for more than twenty (20) persons Other (explain) _____
 Use of the premises during the period commencing at 11:00 p.m. and ending at sunrise

Signed: _____

Representative

Approved: _____ Disapproved _____

Comments: _____

Signed: _____

Director, Parks & Recreation Department

Date: _____