

Weymouth Recreation Department

**Town of Weymouth,
Massachusetts**

Susan M. Kay
Mayor

1393 Pleasant Street
Weymouth, MA 02189

781-682-6124
Fax 781-335-8299
781-331-5124 (TTY)



75 Middle Street
Weymouth, MA 02189

Fax 781-335-3283
781-331-5124 (TTY)

2010 Field Permit Request

Please minimize the dates and times requested!

<input type="checkbox"/> Monday(s)	<input type="checkbox"/> Friday(s)	Start Date: _____
<input type="checkbox"/> Tuesday(s)	<input type="checkbox"/> Monday(s) – Friday(s)	End Date: _____
<input type="checkbox"/> Wednesday(s)	<input type="checkbox"/> Saturday(s)	Start Time: _____
<input type="checkbox"/> Thursday(s)	<input type="checkbox"/> Sunday(s)	End Time: _____

Activity: _____

Field that you are requesting: _____

Second Choice: _____

Third Choice: _____

Method of Payment: _____ Cash
 _____ Check # _____
 _____ Credit Card Type: _____

Application fees: These fees apply to each application received and are limited to a maximum season of 4 months. Please check one box.

Fields or Outdoor Courts:

\$75.00 - Adult / season

\$20.00 - Youth / season or single day

Applicants Signature: _____ Date: _____

League/Organization Name: _____

Internal Office Use Only

Date Received: _____ Date Processed: _____ By: _____

League/Organization Info Sheet This information was submitted on ___/___/___

Organization Name: _____ For Profit Non-profit

President's Name: _____

Address: _____

Activity Type: _____ Total # of Participants in League: _____

Total # of Participants in Division? _____ How many total fields are requested for this division? _____

Federal Tax I.D. #: _____

Web Site URL: _____

e-mail address: _____

Contact Person

Must be a live person that we can call when the need arises, not a machine! Fill out as many contact methods as you can. Check the box of any contact methods we can make public.

Name: _____ Title: _____

Address: _____

Home phone: _____ Cell phone: _____

Work phone: _____ e-mail: _____

Required Information to be completed by League/Organization President or CORI Administrator:

Name of CORI Administrator: _____

Address: _____

I understand and verify that all league officers, coaches, officials and volunteers have been CORI checked through the league for the 2010 season according to Massachusetts State Law.

Signature Required by League/Organization President or CORI Administrator: _____

Please help us better communicate your league news to the public through our web page. We can edit, add or make any necessary adjustments. Confirm we have your information accurately posted at: <http://www.weymouth.ma.us/rec/index.asp?id=1287>

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Date Received: _____ Date updated: _____ By: _____