

Town of

**INDEPENDENCE**

**Sports Facilities Permit Application 2016**

286B U.S. 46, Box 164,  
Great Meadows, NJ 07838  
908-246-1348

**Email: [indrecsports@independencenj.com](mailto:indrecsports@independencenj.com)**

Youth Soccer Field: #1 #2 #3 #4 #5 #6  
Adult Soccer Field: #1 #2 #3 #4 #5 #6  
Baseball/Softball Fields: #1 #2 #3 #4 #5 #6 #7

Pavilion          Shed          Trailer

DATES (s): \_\_\_\_\_; Day(s) \_\_\_\_\_ Hours. \_\_\_\_\_

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DATES (s): \_\_\_\_\_ Day(s) \_\_\_\_\_ Hours. \_\_\_\_\_

Type of Event: \_\_\_\_\_ Number of Attendees. \_\_\_\_\_

Organization Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Insurance Company Information: \_\_\_\_\_ Policy Limits \_\_\_\_\_

Contact's Name: \_\_\_\_\_ Home Phone. \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone. \_\_\_\_\_

Alternate Contact Name: \_\_\_\_\_ Home Phone. \_\_\_\_\_

Address: \_\_\_\_\_ Cell Phone. \_\_\_\_\_

It is hereby agreed and understood that if permission is granted, the undersigned applicant will assume responsibility for the preservation of order, damage to or loss of property, and the liability for any personal bodily injuries which may occur during the use of the town's facilities.

The undersigned have read and agreed to conform to the rules and regulations governing the use of town property. The Recreation Commission receives the right to rescind any permit granted under this application. Rules prohibiting the possession of intoxicants on the premises and smoking must be observed at all times. No application will be processed without certificate of insurance and applicable fees. Permit fee is non-refundable/

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check Amount. \_\_\_\_\_ Check Number. \_\_\_\_\_

Do not write below this line

Application Approved: \_\_\_\_\_ Check Amount. \_\_\_\_\_ Check Number. \_\_\_\_\_

Application Approved with following restrictions. \_\_\_\_\_

\_\_\_\_\_  
Sports Director

\_\_\_\_\_  
Date