



Williston Recreation & Parks

PARKS FACILITIES PERMIT APPLICATION

(All Information needs to be complete, specific, and accurate)

Today's Date: _____

ORGANIZED GROUP / ORGANIZATION / BUSINESS / INDIVIDUAL INFORMATION

Organization Name:	Phone:
Address: (address/town/state/zip)	
Contact Name:	Cell Phone:
Email Address:	Home Phone:

PARKS FACILITIES REQUEST INFORMATION

Name of Activity: _____

Type of Activity: (check those that apply)

Participants: (check those that apply)

☐ PRACTICES

☐ GAMES

☐ YOUTH

☐ ADULT

☐ BOTH

OTHER: _____

Estimated Number of People: _____

Estimated Number of Vehicles: _____

Athletic Fields/Courts: (This is a list of the Athletic Fields & Courts that are available for rent and their location)

VILLAGE COMMUNITY PARK

Multi-Purpose Field A
Multi-Purpose Field B
Soccer Field A- Reg
Soccer Field B- U12
Soccer Field C- U10
Soccer Field D- U10
Volleyball Courts- 4-Sand

ALLEN BROOK COMMUNITY PARK

Multi-Purpose West Field
Multi-Purpose East Field

WILLISTON CENTRAL SCHOOL

Baseball Field
Softball Field

ROSSIGNOL COMMUNITY PARK

Tennis Court- 1
Pickleball Courts- 4

DAYS, DATES, TIMES, FIELD/COURT REQUESTED, AND NUMBER OF FIELDS/COURTS

If you have a schedule of the days, dates, and times that you are requesting, it can be submitted rather than filling out the Information below. Be sure to fill out the Type of Field you are Requesting and how many are needed.

Single Day Request:

<u>DAY</u>	<u>DATE</u>	<u>TIMES</u>	<u>FIELD/COURT REQUEST</u>	<u># of Fields/Courts</u>
_____	_____	From: _____ To: _____	_____	_____
_____	_____	From: _____ To: _____	_____	_____
_____	_____	From: _____ To: _____	_____	_____

Multi-Day Request:

Type of Field/Court Requested: _____

<u>DAY</u>	<u>DATES</u>	<u>TIMES</u>	<u># of Fields/Courts</u>
_____	From: _____ To: _____	From: _____ To: _____	_____
_____	From: _____ To: _____	From: _____ To: _____	_____
_____	From: _____ To: _____	From: _____ To: _____	_____
_____	From: _____ To: _____	From: _____ To: _____	_____
_____	From: _____ To: _____	From: _____ To: _____	_____

Signatures are required on the next page of this permit application

The application must be submitted a minimum of Two Weeks before the scheduled event.

PERMIT STIPULATIONS and RELEASE & WAIVERS

PERMIT STIPULATIONS

The following are the stipulations and conditions for obtaining a permit for any Department facility.

- Permit applications are required to request scheduling the use of a facility. They consist of an Events Permit application, a Parks Facilities Permit Application, or a R.E.C. Zone Permit Application.
- No individual, organized group, business, or organization has priority use without a valid permit from the Department.
- No other means or Apps are accepted as a reservation. Only the Department permits.
- Permit applications must be submitted a minimum of one week before the first date of the requested reservation.
- Permits will not be issued until payment, and a valid Certificate of Insurance are received before the first date of the reservation.
- Permission to use a facility will only be granted to a person twenty-one years of age and older.
- The Department reserves the right to deny permission to use a facility if an activity/event is seen as potentially causing detriment to the facilities and/or resources.
- Denial of a permit may appeal to the Williston Recreation & Parks Committee.
- Facilities have their own sets of rules and regulations that apply. Specific rules and regulations will be provided on the permit that is issued.
- The permit holder must always be present during the facility use and have the permit on their person.
- The permit holder must show the permit upon request from a representative of the Town of Williston.
- All participants of the user group are restricted to the designated facility, within the time frame listed on the permit.
- The permit holder is responsible for the actions of all people using the facility. It is the responsibility of the permit holder to inform all members of their group of the rules and regulations.
- Unruly behavior will result in immediate cancellation of a permit and/or future use of facilities.
- Any costs incurred by the Town in preparation for, or after, such activity/event will be charged to the permit holder.
- Permits are not transferable. The facility is to be used only by the individual, organized group, business, or organization it was permitted for, and for the purpose, day, dates, and times as stated on the permit.
- A specific day, date, and time, on the permit, may be canceled if the facility is needed for a Recreation program, Town event, or School function if on school property. Advanced notice will be given to the contact person.
- Permit holders must notify the Department of all times that the facility will not be used. See the Weather and Cancellation Section in the policy.
- The permit holder will comply with ADA requirements and will make their activity/event accessible for those who require special assistance.
- Individuals, organized groups, businesses, or organizations reserving facilities for use must provide the Department with a Certificate of Insurance as proof of a Comprehensive Liability Policy naming the Town of Williston, as an additional insured party, from the loss or liability arising from their sponsored activities. The limits of the Comprehensive Liability Policy should be no less than one million dollars (\$1,000,000) per occurrence and two million dollars (\$2,000,000) per aggregate.
- All individuals, organized groups, businesses, or organizations using Town facilities must comply with all local, State of Vermont, and Federal codes, regulations, and laws.
- If an individual, organized group, business, or organization is found to violate any Town of Williston ordinance or policy, State of Vermont or Federal law, or the rules and/or conditions of Use, the individual, organized group, business, or organization will cease to use of the facility until the situation can be remedied.
- The Permit Holder is responsible for ensuring compliance by all staff, volunteers, performers, vendors, guests, and other visitors to the property.

ACKNOWLEDGE OF UNDERSTANDING, I acknowledge that I have read and understand the Permit Stipulations above and agree to abide by them. I also acknowledge that I will read and follow all rules and regulations for each facility I rent, as well as share them with all persons in my group.

Applicant's Signature: _____

Date: _____

LIABILITY RELEASE

IN CONSIDERATION, of permission granted to use Williston facilities, I hereby and forever discharge and release the Town of Williston, its agents, employees, and officers, from all actions, claims, demands, judgments, and damages which we, or any of the participants, may have, or claim to have, or acquire in the future, for all personal injuries, or property damage, arising out of our organization's use of the permitted facility.

WE ACKNOWLEDGE that we have total responsibility for our group and the safety of all. In addition, we acknowledge that the Town of Williston has no responsibility for the condition of the facility, be it a building, room within a building, field, or open space, and that a supervisor from our organization shall always inspect the premises before use to ascertain that the premises are in safe and useable condition. We further acknowledge to the Town of Williston that our organization has adequate liability insurance, and that such insurance protects the Town of Williston to the extent of its interest. We further acknowledge that a Certificate of Liability Insurance will be provided to the Town of Williston, naming the Town of Williston as the Certificate Holder and as Additional Insured under the policy. This will be sent to the Recreation Department, along with payment, before being issued a permit.

TITLE II-ADA: (Americans Disability Act) - Note: Title II of the ADA prohibits the Town of Williston from providing support including facilities to any organization which discriminates based on disability. We agree that while we use the Town of Williston's facilities, parks, fields, and buildings for practice, games, tournaments, meetings, and other such events, we will not discriminate based on disability.

The undersigned, being a duly authorized representative of the above-named organization, has executed this release on the day and year written below.

Applicant's Signature: _____

Date: _____

Department Use Only:

Action: _____ Approved _____ Denied (Reason Denied: _____) Put into System: Yes No
Field/Facility Assigned: _____ Condition of Use: _____
Fees Assessed: _____ Per Policy _____ One Time Fee \$ _____ Other: _____ COI Received: Yes No
Invoice Issued: Yes No Invoice Sent: _____ Invoice Paid: _____ Permit Issued: Yes No