



## Town of Millon

P.O. Box 310 \* Milton, New Hampshire 03851-0310 t. (603) 652-4501 \* Fax (603) 652-4120  
www.miltmmh-us.com

### RECREATION FACILITY USE APPLICATION

Application is hereby made for the privilege of using (please check)

<input type="checkbox"/> Recreation Rooms (west side of town hall)	<input type="checkbox"/> Town Hall (east side)
<input type="checkbox"/> Town Beach Baseball Field	<input type="checkbox"/> Jones Brook Park
<input type="checkbox"/> Waumbeck Dam Park	<input type="checkbox"/> Outlet Dam Park
	<input type="checkbox"/> Milton Town Beach

**\*\*Note: To avoid conflict and confusion with other groups as well as our scheduled Maintenance please allows for set-up and clean up time if necessary; your group will Be expected to arrive and/or depart at the time we have scheduled for you. A \$50.00 deposit fee is required. The deposit fee will be returned once your group has cleaned up after your event and the facility has been inspected for damages.**

Beginning on (date) \_\_\_\_\_ and ending on (date) \_\_\_\_\_

Time/s \_\_\_\_\_ For the purpose of: \_\_\_\_\_

ADDITIONAL Info/date/times: \_\_\_\_\_

Number of persons expected to participate: \_\_\_\_\_ Number tables/chairs: \_\_\_\_\_

Food/Beverage served? Yes/no \_\_\_\_\_ Is there any group related admission fees? Yes/No \_\_\_\_\_

On behalf of \_\_\_\_\_  
(Organization/individual)

Officers or Chief Representative: \_\_\_\_\_  
(Print, contact person's name)

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Alt Contact# \_\_\_\_\_ Fax# \_\_\_\_\_

**The applicant (if not Town/school Program) most provide a certificate of insurance identifying the Town as an additionally insured party when requesting usage of any Town property or building. Required amounts: General Liability/Bodily Injury/Property Damage combined \$1,000,000.**

**PLEASE TURN OVER and READ and SIGN RULES & REGULATIONS< HOLD HARMLESS AGREEMENT**

**RULES AND REGULATIONS**  
**GOVERNING USE OF RECREATION FACILITIES**

1. **The applicant (if not Town Program) must provide a certificate of insurance identifying the Town as an additionally insured party when requesting usage of any Town property or building. Required amounts: General Liability/Bodily Injury/Property Damage combined \$1,000,000.**
2. **Organization or groups using facilities shall see that all persons are completely out of the facility within the time specified in the approved application**
3. **The carrying or consumption of alcoholic beverages, the use of profane or objectionable language or disorderly conduct is strictly prohibited. Those violating will be required to leave the premises.**
4. **The applicant organization shall be responsible for damage to the property resulting from its use thereof, whether by accident or otherwise, and shall pay the entire cost of the fixing of such damages.**
5. **Any damages to the property or any injury to any person must be reported to the Recreation Department as soon as reasonably possible and at no time less than 24 hours of occurrence.**

**HOLD HARMLESS AGREEMENT**

In consideration of the use of the Town of Milton's Buildings/Property, the above . applicant shall at his/her/their sole expense, defend, indemnify, and hold harmless the Town of Milton and its respective officers, agents and employees from any and all claims, demands, actions and causes of action, damages, costs, loss of services, expenses and compensation, including but not limited to any and all claims for personal injury, debt and property damage which may, in any way, arise from or out of the applicant's use of the Town of Milton's Buildings/Property.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**APPROVAL**

**Signature**\_\_\_\_\_

**Date**\_\_\_\_\_

Recreation waiver form 8/6/10

The Three Ponds Region