

FLORENCE TOWNSHIP
APPLICATION FOR USE OF FACILITIES

APPLICANT:

Group/Organization: _____

Name of Responsible Person: _____

Address: _____

Day Phone Number: _____ Night Phone Number: _____

Alternate Contact Person: _____

Day Phone Number: _____ Night Phone Number: _____

FACILITY REQUESTED:

- | | | |
|--|--|---|
| <input type="checkbox"/> Susan M. Muchowski Field (Girls Softball) | <input type="checkbox"/> Nyikita Field (Baseball) | <input type="checkbox"/> Veterans Park Baseball Field |
| <input type="checkbox"/> Water Works Field (Girls Softball/ Baseball) | <input type="checkbox"/> McCoy Field (Girls Softball/Baseball) | <input type="checkbox"/> Veterans Park Softball Field |
| <input type="checkbox"/> Richard Coates Field (Baseball) | <input type="checkbox"/> E.B. Marter Soccer Field 1-Upper | <input type="checkbox"/> Veterans Park Soccer Field |
| <input type="checkbox"/> Eugene A. Olaff Field (Baseball) | <input type="checkbox"/> E.B. Marter Soccer Field 2 -Lower | <input type="checkbox"/> Veterans Park Football Field |
| <input type="checkbox"/> Woodlawn Avenue Field (Girls Softball/Soccer) | <input type="checkbox"/> E.B. Marter Soccer Field 3 New Left | <input type="checkbox"/> Wilke Park Tennis Court N |
| <input type="checkbox"/> R.D. Wood Field (Baseball/Soccer) | <input type="checkbox"/> E.B. Marter Soccer Field 4 New Right | <input type="checkbox"/> Wilke Park Tennis Court Ctr |
| | | <input type="checkbox"/> Wilke Park Tennis Court S |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | |

DAY & TIME OF REQUESTED USE:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Hours of Use: _____

Beginning Date: _____ Ending Date: _____

Description of Use: _____

As the authorized representative of the above named group or organization making this application, the undersigned agrees to use the township facilities in accordance with the policies, rules and regulations established by the Township of Florence.

Date: _____ Signature: _____

DO NOT WRITE BELOW THIS LINE

Date Received: _____

Rec Dir: _____ Rec Committee _____ Twp Council: _____

Remarks: _____