

**TOWNSHIP OF LOWER MERION**  
**DEPARTMENT OF PARKS & RECREATION**  
75 EAST LANCASTER AVENUE  
ARDMORE, PA 19003-2376

Permit # \_\_\_\_\_  
Security Deposit \$ \_\_\_\_\_  
Permit Fee \$ \_\_\_\_\_  
Receipt # \_\_\_\_\_

**APPLICATION FOR THE USE OF TOWNSHIP PROPERTY**

Please read all conditions regarding permits.  
Complete, sign and return this application to the above address.

The undersigned respectfully requests the use of Township property as indicated below:

Single Use \_\_\_\_\_ Seasonal Use \_\_\_\_\_ Yearly Use \_\_\_\_\_

If this is a seasonal request for multiple sites, dates and times, you must also complete the multiple site request form.

\_\_\_\_\_  
Name of the park or facility *(Single and Yearly use only)* \_\_\_\_\_ Date(s) desired \_\_\_\_\_

Special Arrangements: (Tent, Inflatable's, Grill, etc) \_\_\_\_\_

Time: From \_\_\_\_\_ a.m. p.m. To \_\_\_\_\_ a.m. p.m.  
*(Single and Yearly use only)*

Total number of people \_\_\_\_\_ Number of Lower Merion Residents \_\_\_\_\_  
*(Verification to be supplied upon request)*

Age range of participants \_\_\_\_\_ # of Adults \_\_\_\_\_ # of Teams (if applicable) \_\_\_\_\_

Check all that apply: \_\_\_\_\_ Youth \_\_\_\_\_ Adult \_\_\_\_\_ Co-ed \_\_\_\_\_ Competitive \_\_\_\_\_ Recreational  
\_\_\_\_\_ Other \_\_\_\_\_

Exact Area(s) Needed \_\_\_\_\_

Describe proposed use \_\_\_\_\_

Program - Open to the public, members only, invite only, or other ? \_\_\_\_\_

How is registration conducted? \_\_\_\_\_

Organization, League or Group Name \_\_\_\_\_

Address \_\_\_\_\_

Is this a Non-Profit Organization (IRS status 5013C)? Yes or No

If "No", would you qualify for Non-Profit Status? Yes or No

Check all that apply: \_\_\_\_\_ Admission Charged \_\_\_\_\_ Registration Fees \_\_\_\_\_ Fundraisers \_\_\_\_\_ None

Based upon this request (and other requests) official permits will be sent to you indicating approved dates, times and facilities. All dates and times of the request may not be honored.

## APPLICATION FOR THE USE OF TOWNSHIP PROPERTY (CONTINUED)

I the undersigned representative, acting on the behalf of the organization, hereby release the Township of Lower Merion, its officers, agents, employees, sponsors, organizers, and all leaders assigned by them, from liability for any damage and injury to any person or thing in connection with the issuance of a permit for the use of Township facilities. I have read the conditions and regulations regarding the use of Township property and understand that failure to comply with such policies by myself or any other in the organization may result in the temporary or permanent suspension of permit privileges.

Applicant's Name \_\_\_\_\_

Day Phone # \_\_\_\_\_ Evening Phone # \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Fax # \_\_\_\_\_

Applicant's Address \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Name of person who is the official group representative AND WHO WILL BE PRESENT AT ALL TIMES

Name \_\_\_\_\_

Day Phone # \_\_\_\_\_ Evening Phone # \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Fax # \_\_\_\_\_

Address \_\_\_\_\_

### *Application Check List*

Below you will find a checklist of information, which must be submitted, with your facility request form to the Department of Recreation. The information on the checklist is part of your application for use of Township of Lower Merion and/or School District Facilities.

<b>Required</b>		<b>Information</b>	<b>Received</b>
<b>Yes</b>	<b>No</b>		<i>For Township use only</i>
_____	_____	<b>Present year's game and practice schedule.</b> Certificate of Insurance.	
_____	_____	<b>List of current year's officers and names of emergency contacts for facility problems. (Including Name, Address and Phone Number)</b>	
_____	_____	<b>Rosters/Participant/Guest List (Including Name, Address and Phone Number)</b>	
_____	_____	<b>Proof of Non-Profit Status.</b>	
_____	_____	<b>Registration dates, times, locations and fees.</b>	
_____	_____	<b>Other</b> _____	