

TOWNSHIP OF LOWER MERION
DEPARTMENT OF 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 attached 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. 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.

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/Facility _____ Date(s) desired _____

Exact area(s) needed _____

Time (Should include set up and clean up) Start _____ am pm End _____ am pm

Describe proposed use _____

Special arrangements _____

Program – Open to the public, members only, invite only, or other? _____

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

How is registration conducted? _____

Check all that apply: Admission charged Registration fees Fundraisers None

Age range of participants _____ # of adults _____ # of teams (if applicable) _____

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

Organization, League or Group name _____

Address _____

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

If “No”, would you qualify for Non-Profit status? Yes No

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 _____

Applicant's address _____

E-Mail address _____

Day phone # _____ Evening phone # _____

Signature of Applicant _____ Date _____

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

Same as Above

Name _____

Address _____

E-Mail address _____

Day phone # _____ Evening phone # _____

Application Check List

Applicants seeking use of township property may be required to submit the documents listed below.

, R~~NG~~CUG'P QVG'CVJ NGV~~IE~~'H~~KG~~NF'RGTO KVUY ~~K~~NN'TGS WKTG'CNN'F Q~~E~~WO GP VU

T~~ge~~gk~~gf~~
Hqt 'Vqy puj lr 'Wig'Qptf

_____ **Proposed game and practice schedule.**

_____ **Certificate of Insurance.**

_____ **List of current year's officers and names of emergency contacts for facility problems.**
(Including Name, Address and Phone Number)

_____ **Rosters/Participant/Guest List**
(Including Name, Address and Phone Number)

_____ **Proof of Non-Profit Status.**

_____ **Registration dates, times, locations and fees.**