



## Indoor Facilities Application

Gym: \$25/Hour, Function Rooms/Conf. Room: \$10/ Hour

Applicants for use of the Parks & Recreation Department indoor facilities should complete and return this form to the Parks & Recreation Department office at the Center for Human Services or mail to: Parks & Recreation Department, 61 Center Street, Burlington, MA 01803 or email this form to [plafauci@burlington.org](mailto:plafauci@burlington.org).

When approved and signed by a Parks & Recreation Department official, this application serves as a permit to use the named facility as specified. Reservations will be confirmed for only one season (approximately three months). Groups wishing to extend use for additional seasons must contact the Parks & Recreation Department to request an extension.

**ORGANIZATION** \_\_\_\_\_

**PERSON-IN-CHARGE** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

1. Facility requested \_\_\_\_\_

Room(s) \_\_\_\_\_

2. Day of week \_\_\_\_\_

Date(s) \_\_\_\_\_

3. Start time \_\_\_\_\_ End Time \_\_\_\_\_

4. Describe activity \_\_\_\_\_

5. Estimated attendance: Children \_\_\_\_\_ Adults \_\_\_\_\_ %Residents \_\_\_\_\_

6. What equipment, if any will be brought in? \_\_\_\_\_

7. Parks & Recreation Department equipment requested \_\_\_\_\_

8. Will there be an admission charge? \_\_\_\_\_

9. Other requests or additional information \_\_\_\_\_

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**USER'S RESPONSIBILITIES:**

Before signing this request, please review the Recreation Department Policy  
"Use of Indoor Facilities."

Signature of person making request \_\_\_\_\_

Date \_\_\_\_\_

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**FOR RECREATION DEPARTMENT USE**

USER FEE: \$\_\_\_\_\_ KEY DEPOSIT \$\_\_\_\_\_

Number of supervisors and salary rate \_\_\_\_\_

Number of supervisors and salary rate \_\_\_\_\_

Other financial responsibilities \_\_\_\_\_

Special instructions or conditions \_\_\_\_\_

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APPROVED \_\_\_\_\_ DATE \_\_\_\_\_