

GRAFTON LIONS CLUB

68 Brigham Hill Road, Grafton, MA
Mail to: PO Box 111, Grafton, MA 01519

Application for Use of Facilities

(Please print legibly)

Name of Organization _____

Organization Type: Profit Non-Profit Other

Identify all facilities requested:

Soccer Field Field Beyond Bridge Lions Pavilion

Description of Event/Activity: _____

Date Desired _____ Time(s) from _____ to _____

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NOTE: This request is subject to availability and review by the Lions Club Board of Directors. Submitting the form is not a guarantee that the facilities will be available

PROPERTY USE POLICY:

- Organization must provide a certificate of liability insurance for their organization and must name The Grafton Lions Club as an additional insured.
- Smoking and Alcohol consumption is prohibited.
- The property manager will go over a checklist covering items such as trash removal, rest rooms, etc. prior to use.
- Non-compliance with the checklist may result in a forfeiture of the security deposit.
- Organizations are liable for any damages to Lions Club property.

FEES:

For Profit and Other Groups = \$50 per day plus a \$150 security deposit.

Non-Profit organization = No charge for outdoor use. A security deposit may be required.

As an official representative of the organization named above, I have read the Property Use Policy listed above and am empowered to guarantee that this organization will comply with it in full. I understand further, that should the Policy not be adhered to, permission for further use of the grounds or facilities may be denied. The Grafton Lions Club reserves the right to deny or rescind approval of use for any reason. If you have any questions, please email us at info@grafftonlionsclub.org.

Contact: _____ Title: _____

Cell Phone #: _____ Email: _____

Address: _____ City: _____ State _____ Zip _____

Signed: _____ Date _____

Lions Club Use Only

Space applied for is available is not Available on dates requested

Proof of Insurance Provided

Fee/Deposit Received - Amount \$ _____ Check # _____

Deposit Returned - Date: _____ Property Manager (sign) _____