



Recreation Department
10 Ditson Place, Methuen MA 01844
978-983-8590

Application for Permit to Occupy Recreation Area

Please fill out one application per field.

League/Team Name or Company Name:	League/Team Contact/President:
Applicant Name:	Address:
Phone:	Cell:
League/Team Website:	Email:

Type of Activity: *Please select one* Youth Adult

Check all that apply. Baseball Basketball Cheering Football Lacrosse

Cal Ripken Baseball Soccer Softball Other: _____

Requested Field/Facility: _____

(Note: Enter time needed in From & To format: i.e. 9A to 12P)

Start Date	End Date	Monday Time	Tuesday Time	Wednesday Time	Thursday Time	Friday Time	Saturday Time	Sunday Time

Additional Contact Name: _____

Phone: _____

Email: _____

Cell: _____

It is understood and agreed that the permit applicant will follow the policies in the City of Methuen Field & Facility Permit and Policies Handbook or permit applicant may be subject to permit revocation.

Signature: _____

Date: _____

Attached to this application must be the practice and game schedule for the season requiring field time. Failure to submit the required information may result in denial of permit. Fee will be assessed upon completion of the permitting process in accordance with field/facility fee schedule.

For Office Use Only:

Approved By: _____

Position: _____

Date: _____