

WINCHESTER RECREATION CENTER RENTAL REQUEST FORM

CONTACT INFORMATION

NAME*: _____

ORGANIZATION NAME** (if applicable): _____

Is your organization a Youth?

Adult?

E-MAIL: _____

PHONE: _____

ADDRESS: _____

EVENT INFORMATION

DAYS & DATES REQUESTED: _____

TIMES REQUESTED: _____

PURPOSE OF USE/SPORT: _____

SPECIAL VENDOR NAME** (if applicable): _____

Approximate number of people in attendance during each use. _____

Approximate number of cars that would be using parking spaces. _____

SIGNATURE OF CONTACT PERSON: _____ Date _____

**For individual use, all attendees must sign the [Town of Winchester Field and Court Liability Form](#).*

***For any organization or vendor, please attach professional liability insurance with the Town of Winchester listed as an additionally insured if an organization.*

Please note: Approved rentals will require a signed contract and payment prior to the rental beginning.