

Chelmsford Public Schools

Permit

Application ID: 106127

Status: Approved



Title of the Event: Baseball Season
 Organization Name: Chelmsford Youth Baseball
 Type of Organization: Chelmsford Group-Non Profit
 Organization Address: P.O. Box 62 Chelmsford Ma 01824
 Mailing Address (if different):
 Organization Telephone Numbers: (978) 490-4765
 Representative Filing this Application: Michael Donoghue
 Email: bubba1839@comcast.net
 Representative Telephone Numbers: (978) 490-4765

Will this event occur on multiple dates? Yes

| Building | Facility | Date | Start Time | End Time |
|-----------------|---------------------------------------|------------|------------|----------|
| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/01/2017 | 9:00AM | 8:00 PM |
| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/02/2017 | 9:00AM | 8:00 PM |
| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/03/2017 | 9:00AM | 8:00 PM |
| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/04/2017 | 9:00AM | 8:00 PM |
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| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/09/2017 | 9:00AM | 8:00 PM |
| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/10/2017 | 9:00AM | 8:00 PM |

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| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/21/2017 | 9:00AM | 8:00 PM |
| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 04/22/2017 | 9:00AM | 8:00 PM |
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| Athletic Fields | FLDSHBB-Town-Strawberry Hill Baseball | 05/01/2017 | 9:00AM | 8:00 PM |
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The facility will be used for the following purpose(s):
youth baseball

Number of person using the facility: 1-100

Is extra custodial services needed? No

Will admission be charged? No

Will food and/or beverages be served? No

List any special arrangements or equipment you are requesting (lighting, score board, speakers, kitchen facilities, etc.):
none

Liability Insurance of not less than \$1,000,000 is required.

Do you have coverage in force? Yes

Name of Insurance Broker: K & K Insurance Group/

Policy Limit: 2,000,000

The applicant agrees to all terms and conditions contained in the Regulations Governing the Use of School Facilities and agrees to be fully responsible for all damage to persons, property and/or theft

resulting from the use of School Department facilities.

This application has been approved by . Please print this permit and bring it with you to the event as proof of approval. If there is a fee being charged, your payment must be made by check or money order, no cash is accepted. Please submit all fees along with Liability Insurance, prior to your event, to the address on your invoice. Failure to comply with this policy will result in automatic cancellation without notice.

Notes and Comments:

Use agreement.

Fees & Charges: User: \$0.00 Custodial: \$0.00 Security: \$0.00 Other: \$0.00 **Total: \$0.00**



March 07, 2017

Date

Received by: _____ Date: _____