

2024 Seasonal Field/Facility Request Form

Doylestown Township

This form must be completed legibly and returned by **February 9th** to *Doylestown Township, 425 Wells Road, Doylestown, PA 18901*. Returning organizations will receive first priority based upon historical usage. Others will be considered as space is available.

Submit a separate form for each season requested (check appropriate box):

- Spring (March 18- June 9) Summer (June 10 - August 31) Fall (September 2 - Nov. 24)

Organization _____ Township-based (50% Dtwp residents) Non-Township-based

Contact Person _____ Email Address _____

Address _____

Telephone (day) _____ Telephone (cell) _____

Purpose of Request _____

Facilities Requested: Identify specific fields (requests as submitted are not guaranteed. Township programs take preference)

- Central Park: _____
- Turk Park 1: _____
- Turk Park 2: _____
- Turk Park 3: _____
- Sauerman Park: _____
- Other: _____

Day, Date, Times Requested

DAYS	Dates		Times		CHECK APPLICABLE (if other, specify)		
	Start	End	Start	End	Practice	Game	Other
<input type="checkbox"/> Monday							
<input type="checkbox"/> Tuesday							
<input type="checkbox"/> Wednesday							
<input type="checkbox"/> Thursday							
<input type="checkbox"/> Friday							
<input type="checkbox"/> Saturday							
<input type="checkbox"/> Sunday							

- ... Fees are calculated at the seasonal rate and are not prorated. Permits will not be issued until all required paperwork and fees are received.
- ... Field use is not be permitted until required paperwork, schedules and insurance are received. Complete schedules (dates and times for practices/games) **must** be submitted prior to the start of each season.
- ... Township sponsored/approved events will take precedence over all other activities. From time to time other functions deemed appropriate by the township may take precedence over scheduled field usage. The organization will be notified in advance of any changes to their previously approved scheduled.
- ... The Township reserves the right to close any facility due to weather or other conditions as deemed necessary.
- ... Doylestown Township-based and returning organizations in good standing will be given priority over new applicants.

The individual, group or organization acknowledges having received and read Doylestown Township Ordinance No. 266 - relating to Park System Rules and Regulations and agrees to abide by all rules and regulations set forth in said ordinance. The organization further agrees to leave the site in a clean and orderly condition after each authorized use, and to cooperate with any Township official requesting the user to act in accordance with the above stated guidelines. Full responsibility for any damage to property or persons is assumed by the undersigned as an agent for the sponsor of the event or use. The Township, its officials, employees, agents, and volunteers shall be saved harmless from any claim and/or liability hereby arising out of, or in connection with the function, activities and uses of requested premises.

We further affirm that (check one of the following - Required):

- No township residents are **excluded** from participation in this league/organization/program
- Township residents **are/may be** excluded from participation in this league/organization/program

Signature of Applicant _____ Affiliation with Organization _____

Township Use Below
Line

Seasonal Usage: Yes Fee Assigned \$ _____

Usage Fee Camps: Yes Fee Assigned \$ _____

Other: Yes Insurance Cert. / Received: Yes No



2023 League Annual Recap/Intro Form

Doylestown Township

Any league/organization authorized to utilize Doylestown Township facilities on a seasonal or continual use basis shall be required each year to submit a summary of the league/organization activity. The recap form must be submitted along with the current Facility Use Application as part of the yearly approval process. First-time leagues/organizations are required to submit a this form with their initial application as a baseline snapshot of their organization.

Organization: _____ **Sport:** _____

Participation (please use actual numbers not percentages of Township Residency only, not 18901 zip code):

Total Participants: _____ Total: Doylestown Township Residents: _____ Total: Non-Township Residents: _____

of teams assigned to Doylestown Township Fields: _____ Average # of participants per team: _____

Check One of the following (*must be completed*):

- No Township residents are **not** excluded from participation in this league/organization
- Township residents **are/may be** excluded from participation in this league/organization

Programs/Services Provided (i.e., program: soccer: G-U12, participants: 120):

<u>Program category</u>	<u>Participants:</u>	<u>Program:</u>	<u>Participants:</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Facility Usage (based on actual 2023 usage):

- Days of use: Mon. Tue Wed Thu Fri Sat Sunday M-F S-S
- Times of use: Morning (only) Afternoon (only) Evening (only) Combination
- Location: Turk Park I Turk Park II Turk Park III Central Park Sauerman Combination
- Purpose: Practice Games Games Tournament Other _____

Coaches:

- # Per Team (average): _____ # Coaches Under 18 years of age: _____
- # With Coaching Certification(s): _____ # Coaches without Training: _____
- # With First Aid/CPR Certification: _____ # Coaches/Team w/ CPR Certification: _____
- Required certification and/or /training courses provided to coaches: _____

To the best of my knowledge I attest the above information to be correct.

Signature: _____ (Authorized league Representative/Official) Date: _____

Print Name: _____ Title: _____



Doylestown Township Parks & Recreation
Child Abuse Clearance and Background Check Verification
Third Party Field/Facility/Event Applicant

On behalf of _____ (organization)

I, _____ (authorized representative), swear and affirm
that;

The above named organization its employees and volunteers are in compliance with the *PA CPSL and Pa. Department of Human Services mandated clearances and/or training as required for employees and/or volunteers who have direct contact or routine interaction with children.*

The above named organization assumes full and complete responsibility for programs and/or facility use as authorized via permit issued by Doylestown Township.

Please check one of the following:

- Minor children are left under the direct supervision of staff and/or volunteers during this program/event/facility use.
- Minor children are never left under the direct supervision of staff and/or volunteers during this program/event/facility use (i.e., parents, legal guardian, etc. are present at all times during the program/event).

Organization: _____

Name (print): _____ Position: _____

Email _____ Phone (d) _____

Signature: _____ Date _____



Doylestown Township Parks & Recreation

Maintenance Memorandum of Understanding

Required by all Authorized/Permitted Field/Facility Users

Doylestown Township will provide general park maintenance of the facilities and fields including weekly mowing, trash removal (twp. Containers only), and regularly scheduled township comfort facility cleaning. Excessive wear and tear, littering, abuse/damage of any fields and/or facilities will result in additional restoration/damage fees. Additional maintenance, at the organizations expense, may be requested by the applicant and is subject to the townships authorization and/or ability to accommodate such requests.

The applicant will provide all maintenance relative to their event such as field preparation, lining of the fields, setting of bases, goals, corner flags, restoration from tent placement, trash removal, porta-potty placement and removal, etc. relative to the conditions and term of the approved permit.

Motorized vehicles are not permitted (other than designated parking areas) on park fields or surrounding grass areas for the preparation of athletic fields or any other activities unless specific prior approval is obtained from Township.

No modifications/improvements shall be made without the Township's prior approval. Any request to modify or improve park/facilities shall be submitted in writing for review by the Township at least 60 days prior to anticipated work date.

Any portable structures (i.e., fences, backstops, batting cages, tents, porta-potties, temporary structures, etc.) must be approved by the Township prior to installation and must be removed by the organization immediately following the expiration of the permit or within conditions established within the permit or the Township is authorized to remove such items at the applicant's expense.

The Township will make regular site visits throughout the approved timeframe.

Damage/maintenance other than normal wear and tear (including as a result of use during times of inclement weather), the applicant will be solely responsible for restoration/maintenance as specified by the Township. The applicant shall provide all labor and materials to correct such damage, or pay all associated fees assessed by the Township to have damage corrected.

No permanent structure or equipment shall be erected on Township facilities unless approved by the Township and dedicated for community use.

The Township may cancel, postpone and/or schedule "down time" at any time for preservation of facility condition and/or maintenance as needed. Every attempt will be made to limit these closures to periods before and between active season timeframes.

Authorized League Representative

Date/s

Purpose of field facility Use

Organization

Authorized League Representative

Date



Doylestown Township Parks & Recreation
COVID-19 PA/CDC Compliance Verification
Program Providers / Organizations / Event Providers

Season: Winter/Spring Summer Fall Year: _____

On behalf of _____ (organization)

I, _____ (authorized representative), swear and affirm
that;

The above-named organization / program provider organization its employees and volunteers,

... Are in acting compliance with current CDC COVID-19 guidelines and best safety practices *relative to the delivery of services.*

The above-named organization or third-party provider assumes full and complete responsibility for their program service delivery and/or facility use as authorized by Doylestown Township.

Organization: _____

Name (print): _____ Position: _____

Email _____ Phone (d) _____

Signature: _____ Date _____