

**MILLBURY PUBLIC SCHOOLS
FIELD USE REQUEST FORM**

Date(s) _____ Time _____ Field Location _____ Field # _____

Organization or Group _____

Sport _____ Please check one: Adult Youth

Are all participants Millbury residents? Check one: Yes No (if no please explain)

Special equipment needs or lining requirements if any _____

Name _____ Phone (day) _____

(night) _____

Address _____

I have read the Field Use Policy and will abide by all of the regulations contained therein. I understand that if there is a charge for this field use, I will be billed in accordance with the stated policy.

Applicant _____ Date _____

Superintendent _____ Date _____

MILLBURY PUBLIC SCHOOL - FIELD PERMIT

Name _____ Group _____

Field Location _____ Field # _____

Dates _____ Times _____

Approved _____ Date _____

Business Manager