

**TOWN OF NORWELL FACILITY REQUEST & PERMIT**

**PLEASE PRINT**

**NOTE: Submit Requests at least 3 weeks in advance of date(s) requested.**  
**RETURN TO: Norwell Recreation, P.O. Box 295, 345 Main Street, Norwell, MA 02061**  
**Tel 781-659-8046 Fax 781-659-7795**

**FROM:** Responsible Person \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_  
Organization \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_  
Email address \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_

**THE ABOVE ORGANIZATION/INDIVIDUAL WOULD LIKE TO RESERVE THE FOLLOWING:**

1. FACILITY \_\_\_\_\_
2. ACTIVITY \_\_\_\_\_
3. DATE(S) & DAY(S) OF WEEK \_\_\_\_\_
4. TIMES \_\_\_\_\_
5. Number in Group \_\_\_\_\_ Number of Norwell Residents \_\_\_\_\_
6. Special Equipment Requests \_\_\_\_\_
7. Additional Comments \_\_\_\_\_

8. **Mandatory: Attach a Certificate of Insurance** showing general liability coverage & naming the Town of Norwell as "additionally insured". \_\_\_\_\_
9. **For all youth organizations:**  I certify that our organization is C.O.R.I. certified & that all volunteers have been CORI checked as required by MA state laws. (Chapter 385 of the Act of 2002- Sec 172H) \_\_\_\_\_ (signature of your CORI authorized individual)

It is agreed and understood that if a permit is granted, the undersigned applicant will assume responsibility for the preservation of order of said facility and liability for damage to or loss of property. **Please obey rules on reverse side.**

**NO SMOKING** on school grounds or buildings. *Strictly enforced:* No food or drinks are allowed in the gyms.

**NO ALCOHOLIC** beverages are allowed on town property without a license from the Selectmen.

If usage is a school facility: The custodian will open/close the building, and provide proper accommodations in the building. The School Committee, or its representatives, shall at all times have free access to all parts of a school building whether rented or not. The School Committee reserves the right to rescind any permit granted under this application.

All town ordinances, by-laws, and rules of the Board of Health, Police and Fire Departments regarding public assemblies must be strictly observed. If police protection is required, the organization must pay the police officers. The Norwell Police Chief should be called to ascertain the necessary Police requirements.

**SIGNED: Responsible Person** \_\_\_\_\_ **Date** \_\_\_\_\_

**PLEASE READ RULES ON REVERSE**

<p><b>OFFICE USE ONLY:</b> INITIAL &amp; DATE</p> <p>Principal (or designee): _____</p> <p>HS Athletic Director: _____</p> <p>Custodial Service _____</p> <p>Fee, If Applicable _____</p> <p>Recreation: <input type="checkbox"/> NO CONFLICT _____</p> <p style="padding-left: 20px;"><input type="checkbox"/> <b>CONFLICT</b> _____</p>	<p><b>DATE REQUEST APPROVED:</b> _____</p> <p><b>DENIED &amp; REASON:</b> _____</p> <p><b>COMMENTS:</b> _____</p> <p>_____</p> <p>_____</p>
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