

RECREATION DEPARTMENT  
TOWN OF HAMLIN  
1658 Lake Road  
Hamlin, New York 14464

USE OF FIELDS REQUEST FORM

DATE OF APPLICATION \_\_\_\_\_

GROUP NAME \_\_\_\_\_

ACTIVITY \_\_\_\_\_

DATE(S) OF ACTIVITY \_\_\_\_\_

HOURS: FROM \_\_\_\_\_ TO \_\_\_\_\_

NUMBER OF FIELDS REQUESTED \_\_\_\_\_

PERSON MAKING REQUEST \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

PERSON IN CHARGE OF EVENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_

APPROVED BY RECREATION DIRECTOR \_\_\_\_\_

PLEASE SUBMIT REQUEST AT LEAST ONE MONTH IN ADVANCE

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