



STEVE PIERCE
Director

SCOTT KIERAS
Assistant Director

JIM LEWICKI
Program Coordinator

BEVERLY HODGE
Administrative Secretary

MERWIN MEADOW REQUEST FORM
HOURS: 10:00 AM – 7:00 PM

Name of Organization: _____

Main Contact Name: _____

Address: _____ Email: _____

Phone: (W) _____ (H) _____

Date Requested: _____ Time Requested: _____

Number of Participants: Children _____ Adults _____

Maximum of 100 children- No exceptions

	<u>YES</u>	<u>NO</u>
Does Your Group Plan To Swim?	_____	_____
Are Restroom Facilities Needed?	_____	_____
Is the Pavilion Required?	_____	_____

<u>RESIDENT USE FEE:</u>		<u>NON-RESIDENT USE FEE:</u>	
Up to 25 people =	\$50.00	Up to 25 people =	\$100.00
26 - 50 people =	\$100.00	26 - 50 people =	\$200.00
51-75 people =	\$150.00	51-75 people =	\$300.00
75-100 people =	\$200.00	75-100 people =	\$400.00
> than 100 people =	\$250.00	> than 100 people =	\$500.00

Pre-Memorial Day / Post-Labor Day Custodial Fee: \$60.00

In addition to any fees, each group must provide the department with a \$1,000,000.00 liability insurance policy naming the Town of Wilton as a co-insured. A certificate must be on file in the Recreation office at least one week prior to your event.

Group Rules:

- All requests must be submitted two weeks prior to an event for consideration.
- No vehicles are permitted in the park for drop-off or picking up of supplies.
- No alcohol is permitted in the park at any time.

Payment:

- Once approved, please make a check payable to the Wilton Parks & Recreation within three days to hold your reservation.

I have read and understand all of the above rules: _____

Applicant's Signature

Request Approved: _____
Request Denied: _____

Additional Fee: _____
Total Fee: _____