

**APPLICATION FOR THE USE OF TENNIS COURTS (NON-TRANSFERABLE)
WITHIN THE TOWN OF BARRINGTON, RHODE ISLAND**

Name of Applicant _____

Address _____

Telephone Number _____ Email: _____

Name of Group, Association or Organization Sponsoring the Activity or Event

Address _____

Telephone Number _____ Email: _____

Name of Area for which Permit is desired: **Barrington High School Tennis Court - limited to 2 courts**

Day(s) and Hours for which Permit is desired _____

Estimate of Anticipated Attendance _____

Type of Activity for which Permit is desired _____

Signature _____ Date _____

Processing Fee: \$25.00 separate check. Non-refundable. To be paid once per season for Private Tennis Instruction.

**Private Instruction, Tournament or League: Resident: \$10.00 per court per session
Non-Resident: \$15.00 per court per session**

***A session will be no longer than 1.5 hours**

Applicants are required to provide a **certificate of Insurance** in an amount not less than \$1 million, naming the Town of Barrington as additional Insured, and **Lessee's Indemnification Form**. Lessee's Indemnification Agreement is available at the Town Clerk's Office, Barrington Town Hall, and the applicant's insurance company should provide the Certificate of Insurance. Insurance Certificate & Indemnification Form to be provided once per season.

FOR TOWN USE ONLY:

Application Granted on _____ Application Denied on _____

Reason Denied _____

Alternate Site or Date _____
(will be held for five business days pending re-application by applicant)

Recreation Director, Athletic Field Available _____ Date _____

DPW Director _____ Date _____

Town Clerk _____ Date _____

Date Filed _____

Insurance Certificate _____ Lessee's Agreement _____

COPY TO POLICE CHIEF