TOWN OF NORTHBRIDGE
PLAYGROUND & RECREATION COMMISSION

Camp Field Request (please complete 1 form for each field requested)

Requesting Organization: ________________________________

Contact Name: ________________________________________

Contact Phone Number: ________________________________

Contact Email Address: ________________________________

Requested Field (one field per form, please): __________

Dates/Days Requested: ________________________________

Times Requested: __________________________________

Non-Profit Organization (please indicate Yes or No): ___

BOH approval is required if an activity meets at least three times over a two week period.

Board of Health of Approval: __________________________
(Signature of BOH representative)

Additional details, if any: ______________________________

Approved by the following PRC commissioners:

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<th>Printed Name</th>
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Prior to field use, PRC must receive a signed Participation Consent Form (found at www.northbridgemass.org/parkrec) for each participant along with the camp fee of $150. An insurance binder must also be provided to PRC.