## APPLICATION FOR USE OF THE SHARON GREEN FOR EVENTS Submit Application at Least One Month in Advance

	<u> </u>	to apparentian at Bea	or one manth in the	7 1111100
DATE:				
<b>ORGANIZATION:</b>				
PERSON				
APPLYING FOR PERMIT:				
I EKWII I .				
ADDRESS:				
TOWN & ZIP:				
TELPHONE:			Email:	
Date of Activity:	Approximate Beginning & Ending Time:			
Activity Planned				
Is there a fee charged to	attend or pa	rticipate in the activity	? Yes	No
Is the activity Private _		or Pu	blic	
Will alcohol be sold? Ye	es No V	Vill alcohol be availabl	e? Yes No Bring	g Your Own Alcohol? Yes No
regulations prescribed leading will provide proof of list two (2) million aggregation.	by the Town ability insurate. An organ	of Sharon Green Com nce with general liabil nization must supply a	mittee. It is also agree ity coverage of one ( Certificate of Insurar	will abide by the rules and ed that all individuals and/or groups 1) million dollars each occurrence, nce and an individual binder of parts thereof shall be paid for by
where you will be set	up on the Gr een), the Tov	reen and any particul wn does not provide	ars about the event, bathroom services; t	page to describe your event and i.e. will there be tents (no trucks, therefore, you will need to raffic.
** See page 2 if you are o attendance.	a Light Use Ap	plication for the Sharon	Green. Light Use invo	olves fewer than 20 persons in
	SIGNATURI	E AND PHONE NUMB	BER OF PERSON RE	SPONSIBLE
Signature		Printed Namo		Phone
Nate		Insurance Certificat		nroved
11918		Inchrance Cartitiont	Λn	anravea

Revised: April 22, 2024

## \*\* Light Use of Sharon Green

The activity for which I am applying is a *Light Use of the Sharon Green*. In lieu of having to provide a Certificate of Insurance, I shall be personally responsible for any damage done to the Sharon Green because of this activity.

## SIGNATURE AND PHONE NUMBER OF PERSON RESPONSIBLE FOR LIGHT USE OF SHARON GREEN

Signature Printed Name Phone

Return to: Town of Sharon Green Committee, PO BOX 385, Sharon, CT 06069