

# WASHINGTON TOWNSHIP

## Northampton County

970 Washington Boulevard ~ Bangor, PA 18013-9415

Established  
1871

Phone: 610-588-1524  
FAX: 610-588-0245

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### WASHINGTON TOWNSHIP RECREATION COMMITTEE

#### 2024 Field Usage Policy

For the Months of: \_\_\_\_\_ to \_\_\_\_\_ Year: \_\_\_\_\_

Between the Licensor, Washington Township, and

Licensee: \_\_\_\_\_

Licensee address: \_\_\_\_\_

Licensee contact phone number: \_\_\_\_\_

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**Purpose:** The purpose of this policy is to clarify the field usage for \_\_\_\_\_. It is the responsibility of \_\_\_\_\_ to forward these regulations to all their teams using the fields. The Township reserves the right to revoke the license if any of the conditions contained in the policy are not complied with or for other causes that may be found reasonable by the Board of Supervisors.

- A certificate of insurance issued in the last 10 days, listing Washington Township as certificate holder, with a minimum of \$1,000,000.00 general liability coverage must be submitted with this agreement.
- Licensor shall not be liable for any losses or injuries which occur during the use of the fields.
- A \$100.00 user's fee per month or any part of a month will be assessed to help offset the maintenance expenses.

**Licensee agrees to:**

1. Clean up all trash and debris and place it in the trash receptacles.
2. Furnish and remove any equipment the team may need.
3. Report any field damage to the licensor and make every effort to repair damage as promptly as possible.
4. At the season's end, the fields must be restored to conditions prior to use.
5. Use only seed, and fertilizer approved by the licensor.
6. Obtain any permits needed for the sale of refreshments.
7. Adhere to all general rules and regulations adopted by the Township
8. COMPLY WITH ALL RECOMMENDED CDC SAFETY GUIDELINES.

REQUIRED SIGNATURES

Licensee hereby agrees to indemnify and hold harmless Licensor for any liability whatsoever relative to the usage of the subject facilities and Licensee for itself, its successors, agents, employees, coaches, and participants, specifically indemnifies Washington Township relative to all liability which may arise because of the use of the fields.

DATE: \_\_\_\_\_ LICENSEE: \_\_\_\_\_

DATE: \_\_\_\_\_ LICENSOR: \_\_\_\_\_

WASHINGTON TOWNSHIP OFFICIAL

**For Township Use Only**

Payment Amount: \$ \_\_\_\_\_

Payment Type: Check/ Cash/ Money Order \_\_\_\_\_

Township Official: \_\_\_\_\_ Date: \_\_\_\_\_

Signature