

Town of Sterling, Department of Recreation Athletic Field Request Form

Recreation Office

1 Park Street , Sterling Ma. 01564
 Ph#: 422-3041
 Fax: (978) 422-0289
 Email:jjand@sterling-ma.gov

Directions:

Use one form to request all dates with simular time slots at any ONE FIELD.

Circle each day you would like to request

Notes:

Field approval is based on availability.

Please only request what you are planning to use.

Date Submitted: _____

2014

CIRCLE ONE FIELD PER FORM

Griffin Road Snack Shack	Track	West Sterling Snack Shack
Upper Griffin Road	Softball Field 1	West Sterling Major
Houghton Softball	Softball Field 2	West Sterling Minor
Lower Griffin Road	Babe Ruth Field	Muddy Pond Soccer/Football
Houghton Baseball	Redstone 1	Muddy Pond T-Ball
Horse Pit	Redstone 2	Muddy Pond Softball
Houghton Flag Ftbll/Soccer		

	Su	M	T	W	Th	F	Sa	Su	M	T	W	Th	F	Sa	Su	M	T	W	Th	F	Sa	Su	M	T	W	Th	F	Sa	Su	M	T	W	Th	F	Sa	Su
Apr			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30				
May					1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Jun	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30						
Jul			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
Aug						1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Sep		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30					
Oct				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Nov						1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	

Group Name: _____

Contact Person: _____

Mailing Address: _____

Phone (Day): _____ Phone (eve): _____

Start Times:
Weekdays: _____

End Times:
Weekdays: _____

*Total Group Enrollment: _____ *% Town Resident _____

Weekends: _____

Weekends: _____

E-mail: _____ * Estimated