

Town of Sterling, Department of Recreation Athletic Field Request Form

Directions:

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

Circle each day you would like to request

Recreation Office
1 Park Street , Sterling Ma. 01564
Ph#: 422-3041
Fax: (978) 422-0289
E-Mail: recreation@town.sterling.ma.us

Notes:

Field approval is based on availability.

Please only request what you are planning to use.

Date Submitted: _____

2011

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		

	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	M	T	W	Th								
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

