

Special Event Request Application

Wayland Recreation Department 41 Cochituate Road | Wayland, MA 01778 (508) 358-3660 | waylandrec.com

You may need approval from several departments to host an event in Wayland. You can start the process with this application and then we'll help direct you.

SPECIAL EVENTS

For special events, parades, carnivals, festivals, tournaments, derby's, road races, etc., please attach a letter of intent which includes all details of event; site plans, include sample flyers, registrations forms, etc.

FACILITY/FIELD REQUE	STING Submit a separate red	quest for each site, okay to li	st facilities at same address	
Name of Event				
	ntended Use			
Is this a fundraiser?				
Event date	Tin	ne of Event		
Facility Access Time/Setup Event Breakdown Time				
☐ PRIVATE ☐ PUBLIC	Expected Attendance	Admission F	ees	
	/ORGANIZATION INF		Date of Righ	
			Date of Birth	
			Tax ID	
			Zip	
Phone	Em	ail		
For weather and / or sch	eduling conflicts - Contact ₋			
Phone	Ema	ail		
For billing (if different) - (Contact			
Phone	Em	ail		
PRIORITY LEVEL ☐ (1) Wayland Schools		iroup □ (3) Wayland Sen	ior □ (4) Wayland Adult	
FOR OFFICE USE ONLY				
REQUEST RECEIVED	COIEXP	©EVENTPLAN	SPMN SENT	
FACILITY CHARGE DUE	AMOUNT PAID	DATE PAID	CHECK#	



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EVENT DETAILS Submit supporting documents to describe needs, if applicable

IF THE EVENT WILL REQUIRE ANY OF TH	E FOLI	LOWIN	G, PROVIDE EVIDENCE OF ARRANGEMENTS:			
POLICE DETAIL / TRAFFIC / PUB SAFETY		NO .				
BLOCK PUBLIC ROADWAYS						
FIRE PERMIT						
WATER SOURCE						
TEMPORARY STRUCTURES / TENTS						
FOOD PERMIT (BOARD OF HEALTH)						
LIQUOR LICENSE (BOS)						
DPW/CUSTODIAL SUPPORT						
ELECTRICTY / LIGHTS / GENERATOR						
AUDIO/VISUAL NEEDS OR WIFI						
ENTERTAINMENT / DJ / MUSIC	YES					
□LIVE MUSIC □DJ □RADIO/PLAYLIST □AMPLIFIED SOUND □DANCING □PERFORMERS STAGE						
TRASH / RECYCLE RECEPTACLES	YES	NO .				
PORTABLE RESTROOMS (HANDICAP)		NO .				
ARE BUSES EXPECTED						
ABUTTERS NOTIFIED		NO .				
CERTIFIED TO PERFORM CORI CHECKS		NO .				
VENDING / CONCESSIONS		NO	□ FOOD □BEVERAGE □ GOODS □ OTHER			
ACTIVITIES YES NO \square RID	ES \square	INFLAT	TABLES GAMES RAFFLE ANIMALS OTHER			
Please submit a completed application that	include	es:				
A COVID-19 Control Plan that complies with EEA Guidance, subject to approval of the Health Department.						
☐ This signed & dated Special Event Request Application form.						
☐ Certificate of Insurance (COI) listing the 'Town of Wayland' as additionally insured.						
Attachments Any required contracts, certificates, permits, or other attachments.						
□ Site Plan, Traffic Plan and/or Parking Plan						
		-	lity for the use of requested Town of Wayland facility and the Packet for the Town of Wayland Recreation Department:			
REQUESTOR SIGNATURE		TITLE/P	POSITION DATE			

No Smoking, Drugs or Alcohol allowed at any municipal/recreation property. Litter must be removed by the users. Dogs are not allowed on recreation playing surfaces. All dogs must be leashed in public. Do not sublet your reservation. Users must leave facility within 30 minutes after the end of permitted time.