



Town of Kearny

Department of Parks & Recreation
402 Kearny Ave, New Jersey 07032
Phone 201-955-7983 – Fax (201) 955-2379
Director: Ralph A. Cattafi
E-mail rcattafi@kearnynj.org

REQUEST FORM FOR USE OF KEARNY RECREATION FIELDS

Please type or print name clearly!

Name of Group or Department _____

Requestor _____ Requestor Address _____

Requestor Phone Number _____ Email Address _____

Type of Sports Function _____

Field Requested: (please circle one)

Soccer Field Baseball Field Softball Field Futsal Field Street Hockey Rink

Date/Dates Requested _____

Mon Tues Wed Thurs Fri Sat Sun

Event Start Time _____ Event End Time _____

Expected Attendance _____

Please Note: Hold Harmless/Certificate of Insurance & Permit Fee is required upon approval
All permits are based on (2) two hour time limits unless otherwise approved. There is no guarantee of time or location. Permits will not be issued to any sports teams, youth or adult, that are deemed to be in direct conflict with an existing Kearny Recreation Department's recognized programs.

OFFICE USE ONLY

AVAILABLE YES NO
APPROVED YES NO

FACILITY: _____

FEE SUBMITTED YES NO \$ _____