

# SPECIAL EVENT PERMIT APPLICATION



## CONTACT INFORMATION

Contact Name	Organization (if applicable)	Profit / Non-Profit**
Position / Title	Website Address	
Address		
Home Phone	Cell Phone	Email Address
Additional Contact	Phone	Email Address

## TYPE OF USAGE

**EVENT TYPE** (Please Specify) \_\_\_\_\_

**LOCATION REQUESTED** (Please Specify) \_\_\_\_\_

**DATE OF EVENT** \_\_\_\_\_ **TIME** \_\_\_\_\_

Number of Participants \_\_\_\_\_ Number of Spectators \_\_\_\_\_ Number of Cars/Busses \_\_\_\_\_

Entertainment?	Yes	No
Electricity needed?	Yes	No
Water needed?	Yes	No

Fundraiser?	Yes	No
Concession for sale?	Yes	No
Fee charged for event?	Yes	No

**Additional Comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach to the Special Events Application:**

- Open Flame Permit, if applicable
- Parking Plan, if applicable
- Certificate of Insurance with the "Town of Brookline" listed as additional insured (Mandatory with use of Caterer or Entertainment)
- Non-profit in Brookline / 501 c(3) Certificate, if applicable (Mandatory to receive reduced fee)

Please note: Inflatable equipment (bouncy apparatus, etc) is NOT allowed

Brookline Recreation Department  
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