

Permit #: 01-21

Dracut Parks Group Permit Application

Minimum Two Week Advance Notice of Event Date

A GROUP PERMIT IS REQUIRED FOR 10 + PEOPLE

Contact Information (Name of person who is responsible for the group)

Name	Paul McIntosh
Name of Organization	Dracut Soccer Association
Purpose of Outing/Event	Soccer Travel Rec
Street Address	C/O 3 Macintosh Drive
City ST ZIP	Dracut, MA, 01826
Work Phone	
Cell Phone	978 394 0877
E-Mail Address	paulandcaroline@comcast.net
# of Participants	Children = approx 150 multiple sessions Adults = <u>5-6 graders</u> Approx 30 in multiple sessions

Location/Fields applying for (please submit a separate application for each venue)

- ☐ Veteran's Park Spray and Play
☐ Veteran's Park Front Football Field
☐ Veteran's Park Back Football Field
☒ Veteran's Park Soccer Field(s)
☐ Veteran's Park Baseball Field(s)
☐ Dillon McAnespie Basketball Courts
☐ Dillon McAnespie Baseball Field
☐ Dillon McAnespie Multi-purpose Field
☐ Monahan Softball Field(s)
☐ Carrick Baseball Field(s)
☐ Hovey Baseball Field
☐ Intervale Baseball Field
☐ Parker Avenue Field
☐ DPW Field

Date(s) and Time

Date(s): April 10th 2021 - June 19th 2021 Day(s): Sunday Start Time: 8.30AM End Time: 3pm

Do you charge a fee for your program?

☐ NO ☒ YES. If YES, how much is your fee to participate? \$75

Do you have Insurance to cover your program/organization?

Name of Insurance Company	
Mass Youth Soccer	A CURRENT COPY OF YOUR CERTIFICATE OF INSURANCE MUST BE SUBMITTED WITH THIS APPLICATION.

TOWN OF DRACUT * RECREATION DEPARTMENT * 62 ARLINGTON ST. * DRACUT * MA * 01826
978-458-4478 (P)
978-937-9885 (F)
lcahill@dracutma.gov

Permit #: 02-21

Dracut Parks Group Permit Application

Minimum Two Week Advance Notice of Event Date

A GROUP PERMIT IS REQUIRED FOR 10 + PEOPLE

Contact Information (Name of person who is responsible for the group)

Name	Paul McIntosh
Name of Organization	Dracut Soccer Association
Purpose of Outing/Event	Soccer - Travel
Street Address	C/O 3 Macintosh Drive
City ST ZIP	Dracut, MA, 01826
Work Phone	
Cell Phone	978 394 0877
E-Mail Address	paulandcaroline@comcast.net <i>3rd-8th</i>
# of Participants	Children = approx 150 multiple sessions Adults= Approx 30 in multiple sessions

Location/Fields applying for (please submit a separate application for each venue)

- ☐ Veteran's Park Spray and Play
☐ Veteran's Park Front Football Field
☐ Veteran's Park Back Football Field
☒ Veteran's Park Soccer Field(s)
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☐ Monahan Softball Field(s)
☒ ~~Carrick Baseball Field(s)~~
☐ Hovey Baseball Field
☐ Intervale Baseball Field
☐ Parker Avenue Field
☐ DPW Field

Date(s) and Time

Date(s): March 29th 2021 - June 19th 2021 Day(s): M,T,W,Th,F,Sa Start Time: 5pm M-F/8.30am Sat End Time: 8pm M-F/ 5pm Sat

Do you charge a fee for your program?

☐ NO ☒ YES. If YES, how much is your fee to participate? \$95

Do you have Insurance to cover your program/organization?

Name of Insurance Company	A CURRENT COPY OF YOUR CERTIFICATE OF INSURANCE MUST BE SUBMITTED WITH THIS APPLICATION.
Mass Youth Soccer	

PLEASE READ CAREFULLY AND REVIEW THE FOLLOWING RULES AND POLICIES WITH YOUR STAFF AND PARTICIPANTS. THE FOLLOWING ARE SET FORTH TO ENSURE THE SAFETY AND ENJOYMENT OF YOUR GROUP AND ALL WHO ARE USING THE FACILITY.

1. You may be asked to show your permit. Please have it with you the day of your event.
2. We require a 1 adult: 6 children supervision.
3. This permit does not reserve tables or shelters. If tables are available upon arrival, please limit table usage to one per group.
4. No running in the Spray and Play area. The wet surface can become slippery.
5. No climbing on any equipment in the Spray and Play area.
6. Please do not fill buckets/cups of water and throw at each other. Do not pour water on playground equipment.
7. Please be mindful of very young children that are in the Spray and Play area.
8. Carry out all trash that you bring into the park.
9. No glass bottles/container are allowed in the park.
10. No grill/open flames are allowed in the park.
11. No alcohol is allowed in the park.
12. No pets are allowed in the Spray and Play area or water. This is both for safety and health concerns.
13. All children must be accompanied to the restrooms. Do not flush anything other than toilet paper in the toilet. Please use provided garbage cans for diapers, "swimmies", feminine products and paper towels.
14. No tents/shelters.
15. No "bouncy houses".
16. Town Custodian or D.P.W. may be required for your event, at your expense.
17. Due to the extensive irrigation systems at all our parks, no stakes are permitted to be put in the grounds.
18. SPECIAL CONDITIONS: ~~* NO PARKING AT BANK - ZERO TOLERANCE *~~

~~* As per Dracut Board of Health covid regulations, COV and state of MA *~~

The Dracut Recreation Department reserves the right to ask permit holders to vacate the premises or to revoke any/all permits due to weather, inappropriate behavior or for any other reason that jeopardizes the safety of your group, the general public or the integrity of the facility.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am granted a group permit, any false statements, omissions, or other misrepresentations made by me on this application may result in immediate revocation of said permit. I also understand that any damages to the property deemed as excessive or other than "normal wear and tear" may result in a fee to repair said damages.

Name (printed)	Paul M McIntosh
Signature	
Date	12/28/2020

Our Policy

It is the policy of the Town of Dracut to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability for the use of our facilities.

FOR DRACUT RECREATION OFFICE USE ONLY

Approved <i>Lori Cahill</i>	Denied
Fee, if applicable: \$1000.00	Insurance Binder provided: ☒
Date: <i>4/6/2021</i>	Lori Cahill, Recreation Director

Town of Dracut
Dracut Recreation

INVOICE

62 Arlington Street
Dracut, MA 01826
978-458-4478

INVOICE # 01,02-21

TO
Dracut Soccer Association
P O Box 412
Dracut, MA 01826

DATE March 30, 2021

Description	Amount
2021 Field Use Fee for Veteran's Park	\$1,000.00

Paid \$1000.00
4/1/21
check # 7214
Thank you!
Lori Cahill

Total	\$1,000.00
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Make all checks payable to Dracut Recreation

Payment is due within 30 days.

If you have any questions concerning this invoice, contact Lori Cahill 978-458-4478

THANK YOU FOR YOUR BUSINESS!



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/5/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	K&K Insurance Group, Inc. PO Box 803507 Dallas, TX 75380	CONTACT NAME:	Sports Division	
		PHONE:	(800) 441-3994 FAX: (224)-572-5709	
		E-MAIL ADDRESS:		
		INSURERS AFFORDING COVERAGE	NAIC #	
INSURED	Massachusetts Youth Soccer Association, Inc. 512 Old Union Turnpike Lancaster, MA 01523	Insurer A:	Scottsdale Insurance Company	41297
		Insurer B:	Nationwide Life Insurance Company	66869
		Insurer C:		
		Insurer D:		
		Insurer E:		
		Insurer F:		

COVERAGES

CERTIFICATE NUMBER: 20019279

REVISION NUMBER: 0

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD'L INSRD	SUBR WVD	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY ☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS MADE ☒ OCCUR ☐ GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC	X		KKS-85444-00	9/1/2020	9/1/2021	EACH OCCURRENCE	\$1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$300,000
							MED EXP (Any one person)	\$5,000
							PERSONAL & ADV INJURY	\$1,000,000
							GENERAL AGGREGATE	\$5,000,000
							PRODUCTS - COM/OP AGG	\$1,000,000
							PARTICIPANT LEGAL LIABILITY	\$1,000,000
A	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ☒ NON-OWNED AUTOS ☐			KKS-85444-00	9/1/2020	9/1/2021	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
							BODILY INJURY (Per person)	
							BODILY INJURY (Per accident)	
							PROPERTY DAMAGE (Per accident)	
A	UMBRELLA LIAB ☒ OCCUR ☒ EXCESS LIAB ☐ CLAIMS-MADE ☐ DEDUCTIBLE ☐ RETENTION \$			XKS-85445-00	9/1/2020	9/1/2021	EACH OCCURRENCE	\$10,000,000
							AGGREGATE	\$10,000,000
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE ☐ N/A OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under						☐ WC STATUTORY LIMITS ☐ OTHER	
							E. L. EACH ACCIDENT	
							E. L. DISEASE - EA EMPLOYEE	
							E. L. DISEASE - POLICY LIMIT	
B	PARTICIPANT ACCIDENT MEDICAL			BAX-314748-00	9/1/2020	9/1/2021		\$100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

This certificate is issued on behalf of Massachusetts Youth Soccer Association, Inc. & DRACUT SOCCER ASSOCIATION. Certificate Holder is Additional Insured as respects the operations of the Named Insured for sanctioned activities of the state association. CGL General Aggregate is on a per event basis. Certificate valid only for activities beginning 3/5/2021 and ending 6/27/2021.

CERTIFICATE HOLDER

CANCELLATION

TOWN OF DRACUT ~ VETERANS MEMORIAL PARK
USE DURING SANCTIONED SOCCER ACTIVITIES
80 BROADWAY RD
DRACUT, MA 01826

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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Board of Health
Town of Dracut
62 Arlington Street
Dracut, Massachusetts 01826

Tel: (978) 453-8162 | Fax: (978) 770-2586

David M. Ouellette
Health Director
douellette@dracutma.gov

Kara Curley, LPN
Public Health Nurse
kcurley@dracutma.gov

April 1, 2021

Paul McIntosh, President, Dracut Soccer Association

Paul,

As we approach the beginning of your soccer season, I felt that this communication is necessary.

The COVID-19 pandemic is not over. In fact, numbers are increasing again. Rules and regulations set forth by the CDC and the Commonwealth of Massachusetts for return to play, give the local Board of Health the authority to include local rules and regulations.

At this time, all players on the field must properly be wearing masks. There are no exceptions. Additionally, we will not be allowing any medical waivers for non-mask wearing. Please adjust your information that you send out to your parents with the above information.

The mask rules apply to all spectators as well, in addition to social distancing of 6'. If they cannot or do not want to comply, simply do not attend the practices or games.

If you any questions, please do not hesitate to contact me.

David Ouellette



Health Agent
Town of Dracut