

# Monroe Parks & Rec Department      Tennis/Pickleball Court Reservation Application 2022

**Department mailing address and location: 7 Fan Hill Road, Monroe, CT 06468**

DATE OF APPLICATION \_\_\_\_\_ DATE RECEIVED IN PARKS AND RECREATION OFFICE \_\_\_\_\_

**PLEASE PRINT AND COMPLETE ALL INFORMATION**

Person requesting use \_\_\_\_\_ Usage Date \_\_\_\_\_

Total number of people expected \_\_\_\_\_ Number of residents \_\_\_\_\_ Number non residents \_\_\_\_\_

**INDICATE COURT AND TIME PREFERENCE 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> CHOICE**

_____ Tennis Court 1	_____ Pickleball Court 7A	_____ 7:30am-8:45am	_____ 3:00pm-4:15pm
_____ Tennis Court 2	_____ Pickleball Court 7B	_____ 9:00am-10:15am	_____ 4:30pm-5:45pm
_____ Tennis Court 3	_____ Pickleball Court 8A	_____ 10:30am-11:45am	_____ 6:00pm-7:15pm
_____ Tennis Court 4	_____ Pickleball Court 8B	_____ 12:00pm-1:15pm	_____ 7:30pm-8:45pm
_____ Tennis Court 5		_____ 1:30pm-2:45pm	
_____ Tennis Court 6			

Reservation fee is \$1 per person per reservation time slot for Monroe residents and \$4 per person per reservation time slot for non-residents.

**Not all courts or time slots will be available due to department programming, which takes priority.  
Check website for exclusion dates.**

**Checks payable to the "Town of Monroe" or credit card info** must be submitted with application or the application CAN NOT be accepted. The undersigned does hereby individually and as duly authorized agent for the applicant hold the Town of Monroe harmless from any loss claim expense or liability arising out of persons and groups using Town of Monroe Parks and Recreation facilities pursuant to this application. The undersigned, individually and as duly authorized agent for applicant further agrees to comply with all rules and regulations associated with the Town of Monroe Parks and Recreation facilities.

**PAYMENT INFORMATION – all info must be complete to process**

Check#	Amt

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Master Card     Visa     Discover

Exp. Date		security code from back of card

Name as it appears on card \_\_\_\_\_

Billing address is same as address above. If different please provide billing address [include city, state, zip] \_\_\_\_\_

This is a commercial/company credit card. Please provide company name \_\_\_\_\_

**You must submit legible copy of your driver's license**

Printed Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone # \_\_\_\_\_ Signature \_\_\_\_\_

Email address \_\_\_\_\_