PARK FACILITY PERMIT APPLICATION

	Name	Address
	Telephone Number	City, State & Zip
	Please describe your event/activity and identify the specific facility/field within the park you wish to use along with what you are asking from the City: What is the number of people that are involved in your event/activity?	
	What City facilities do you wish to use	
	Acorn Creek Park Laurie LaMotte Memorial Park (Lighting & Warming House) An adult may be requested to take responsibility to lock & unlock restrooms Cornerstone Park Tracie McBride Memorial Park	Eagle Park Hidden Spring Park Trailside Park Royal Meadows Park City Hall
	Please list the date or dates and times you propose to use the facilities:	
	Is anyone charged a fee to watch or participate in your event?	
	Have you used these facilities before? If so, when?	
	Are you requesting additional permits or City services? Yes No (i.e., Road Closure(s), Temporary Liquor License(s), Fireworks Permit or Burning Permit, Use of lights, bathrooms or porta-potties, Park Buildings)	
ıs	se describe	
		r if you are requesting City services, you may and/or make a deposit to cover city costs.
	ed Name of Person Signing	Date
t		
71	nature ee Use Only	
Ç1	nature	

Form number: 2013.01 PU

BE ADVISED THAT YOU ARE REQUIRED TO LEAVE THE PARK AS CLEAN AS YOU FOUND IT PLEASE!

YOU ARE NOT AUTHORIZED TO STORE ATHLETIC OR OTHER EQUIPMENT IN THE PARK OR FACILITIES.



Hidden Spring Park 1 ~ Picnic Shelter



Tracie McBride Park 1 ~ Open Field



Eagle Park
1 ~ Tennis Court

Laurie LaMotte
Memorial Park
1-2 ~ Football
Practice Fields
3-5 ~ Baseball Fields
6 ~ Picnic Shelter
7 ~ Pleasure Ice Rink
8 ~ Hockey Rink
9 ~ Warming House
10 ~ Wheels/Skate
Park
11 ~ Soccer Field





Form number: