



SPORTS LEAGUE FIELD REQUEST FORM

Field requests: _____

PARENT ORGANIZATION

- | | | | |
|--|--|--------------------------------------|---|
| American Legion (Kino BB) <input type="checkbox"/> | Kino Baseball/Connie Mack <input type="checkbox"/> | P.C.J.S.L. <input type="checkbox"/> | AGE |
| A.S.A. Girls Softball <input type="checkbox"/> | Lacrosse <input type="checkbox"/> | S.A.B.A <input type="checkbox"/> | Youth (& Under) <input type="checkbox"/> |
| A.Y.S.O. <input type="checkbox"/> | Little League-District 5 <input type="checkbox"/> | T.Y.F.S.F. <input type="checkbox"/> | Teen (13-17) <input type="checkbox"/> |
| Baja Girls Softball <input type="checkbox"/> | Little League-District 12 <input type="checkbox"/> | Other _____ <input type="checkbox"/> | Adult (18-49) <input type="checkbox"/> |
| | | | Senior (50+) <input type="checkbox"/> |

ORGANIZATION / LEGAL ENTITY

CONTACT INFORMATION FOR: _____ *Only the representatives listed below shall call the Sports Unit/Light Ambassadors to request changes to the permit or light issues.*

Primary Name	Address
City	Zip
Primary Phone Cell/Work/Home	Secondary Phone Cell/Work/Home
Fax	E-Mail
*Secondary Contact Name	*Primary Phone Cell/Work/Home

REGISTRATION DATES:

Registration Starts=	Registration Ends=
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PRACTICE AND GAME SEASON:

Reservation Start Date=	Reservation End Date=
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***Please note that first payment is due 1 week prior to first date of rental, regardless of usage.**

REGISTRATION STATISTICS

Please use the chart below to list your most recent league registration totals. Failure to provide this information will prohibit the processing of your field request form. Thank you for your compliance.

AGES	Total Participants	Total Teams
6 and under		
8 and under		
10 and under		
12 and under		
14 and under		
16 and under		
18 and under		
Adult		
TOTALS		

FIELD REQUEST FORM

Below, please list the park, specific field number, start and ending time(s).

FIELD(S) REQUESTED FOR: _____

Park and Field #	Monday Start-End Time	Tuesday Start-End Time	Wednesday Start-End Time	Thursday Start-End Time	Friday Start-End Time	Saturday Start-End Time	Sunday Start-End Time
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							
Park Field #							

NOTES: Special Dates, Exception Dates, Additional Info, etc...

REQUESTS ARE DUE TO THE SPORTS OFFICE BY FRIDAY: _____
PERMITS WILL BE MAILED OUT THE WEEK OF: _____

***Please note that first payment is due 1 week prior to first date of rental, regardless of usage.**

**By signing below I attest that all information listed on the form is accurate to the best of my abilities. I understand that payment of permit is due 1 week prior to the first date I have listed for field use and permit is subject to cancelation in case of late or non- payments.*

Representative Signature: _____ **Date:** _____

**Sports Unit
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SportsUnit@tucsonaz.gov**