



CARD

Chico Area Recreation & Park District

Outdoor Sports Facility Rental Application

Name of Event/Tournament: _____ Date of Application: _____

Applicant Name: _____ Organization/Group Name: _____

Phone number: _____ Email: _____

Mailing Address: _____

ACTIVITY	USER GROUP	Number of Teams: _____
Baseball	Youth	Number of Players Per Team: _____
Softball	Adult	Number of Anticipated Spectators: _____
Soccer		Yes No
Lacrosse	EVENT	Will the Event be Advertised?
Basketball	Practice	Will There be Amplified Sound?
Volleyball	Game	Will There be Vendors?
Other _____	Tournament	Will Food or Drinks be Sold?

FIELD REQUEST

Field	Day(s) of Week	Start Date	End Date	Start Time	End Time	Field Prep		Lights	
						Yes	No	Yes	No