

Signed By

City of Winter Park Athletics Division

Field Request Form

	Contract sent:		Received by:
CITY OF CULTURE AND HERITAGE	Received:		Date:
Date:			*Please Print Clearly if not typed. Complete all fields.
Name:			·
 Геат/ League Name: 			Mail to: City of Winter Park/Athletics 721 West New England Ave. Winter Park, FL 32789
Billing Address			Fax to: 407-599-3454
State Zip Code			Email: recreation@cityofwinterpark.org
Phone Number	<u> </u>	Youth or Adult League	
email		# Expected Participants	
Activity/ Sport:			
Check the boxes you a	are requesting	Practice Games	
MLK 1	Cady Way 9	Date Range	Time
☐ MLK 2	Cady Way 10	(Start Date To End Date)	Sunday
☐ MLK 3	Showalter Track		Monday
Ward A1	Showalter Field		Tuesday
Ward A2	Showalter Concession	Note any dates in range you DO	Wednesday Thursday
Ward B	Showalter Equipment	NOT WANT	Friday
☐ Ward C	Showalter Stadium		Saturday
	Showalter East 1		
Little League Field #	Showalter East 2		
Field Pren/Lines-	Sinale Linina/Pren \$50: M	ulti/Specialty Lining/Prep \$100	
		d Lines/Prep X \$50 =	+TAX
Number of Weeks		d Lines/Prep X \$100=	- _ +TAX
Proof of Insurance	eNO INSURANCE= NO	PLAY Send Copy of Insurance with this	form
above. Until a signed a at least 3 business days schedule for all fees. Fi Priority users: Sept. 1-5 May 13. Background Checks are	greement is in possession in advance. Unscheduled eld capacity is 400 hours p	or late reservations may result in an additer season based on 2 seasons per year. Suspent. 29. Summer/Fall season (July-Dec) Parvolving youth.	MED. Reservation Requests must be made

Date