

Santa Cruz County Parks

979 17th Avenue Santa Cruz CA, 95062 Ph: (831) 454-7901 www.scparks.com

League Reservation Requests 2022

Organization Name:	
Organization Mailing Address:	
<u>Auth</u>	orized Agent Account Information
*An authorized agent for the or	ganization/company must provide personal contact information below
Name	
Work Email	Home Email
Day Phone ()	Cell Phone ()
Home address	City
StateZip Code	Gender Birthdate
· · · · · · · · · · · · · · · · · · ·	following information for your 2022 Sports Field Permit Requested Field Space:
Provide specific date ranges, days and t	imes of use:
Date Range of Use:	
Day(s) of Use (please select): No select No select No select): Times of Use (weekdays):	Are league requests consistent to previous years permits? Yes or No
Times of Use (weekends):	Explain any changes or new requests:
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Adult or Youth League?	
Please list any date(s) your league will not l	be using the field due to vacations and/or holidays.
representative of the group or entity, and I am empower Assumption, Waiver, and Indemnity documents, and ha	Disclaimer: ded to Parks is true and correct; If this Permit is issued to a group or entity, I am the authorized red to make this agreement on its behalf; I have received a copy of the Terms and Conditions and ave read and understand them. Both individually and on behalf of the group or entity, I agree to ordinances of the County of Santa Cruz, the State of California, and the United States.
Permittee Signature	