

**SMYRNA PARKS & RECREATION DEPARTMENT  
ATHLETIC FIELD USE  
TOURNAMENT APPLICATION**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ (W)

ADDRESS \_\_\_\_\_ (H)

ORGANIZATION \_\_\_\_\_

NAME OF EVENT \_\_\_\_\_

LEVEL/CLASSIFICATION(class, local, district, ect.) OF TOURNAMENT: \_\_\_\_\_

WHAT ASSOCIATION RULES WILL YOU BE USING? \_\_\_\_\_

WHICH PARK(S)? \_\_\_\_\_

WHICH FIELD NUMBERS? \_\_\_\_\_

BASE DISTANCE (OR FLD DIMENSIONS) FOR EACH FIELD \_\_\_\_\_

[USE OTHER SIDE IF NEEDED]

PITCHING DISTANCE FOR EACH FIELD \_\_\_\_\_

[USE OTHER SIDE IF NEEDED]

TOURNAMENT DATES & DAYS: \_\_\_\_\_

START TIME: \_\_\_\_\_

END TIME: \_\_\_\_\_

SPECIAL ARRANGEMENTS NEEDED FROM PARKS DEPARTMENT: \_\_\_\_\_

NUMBER OF TEAMS EXPECTED? (APPROX) \_\_\_\_\_

TOURNAMENT ENTRY FEE PER TEAM: \$ \_\_\_\_\_

NAME OF TOURNAMENT MANAGEMENT COMPANY YOU ARE COORDINATING WITH?  
(if applicable): \_\_\_\_\_

NAME/PHONE NUMBER OF CONTACT PERSON WITH MANAGEMENT GROUP  
\_\_\_\_\_

PROCEEDS GO TO (explain terms of agreement {fees included} of management group, if  
applicable): \_\_\_\_\_

CONCESSIONS OPERATED BY \_\_\_\_\_ CONTACT \_\_\_\_\_  
AT \_\_\_\_\_ FOR CONCESSION STAND ARRANGEMENTS.

USER FEE: \$40.00 PER FIELD PER DAY PER FACILITY USED PLUS \$10.00 PER TEAM ENTERED IN  
TOURNAMENT.

\$100.00 CLEANING FEE PER DAY PER FACILITY USED--REFUNDABLE IF FACILITY IS CLEANED  
EACH DAY

**PLEASE HELP WITH TRASH PICK UP DAILY.**

INSURANCE CERTIFICATE MUST BE SUBMITTED ALONG WITH THIS APPLICATION

REQUEST MUST BE SUBMITTED 30 DAYS PRIOR TO USE.

*This is to confirm that the above entity making this facility request will assume all legal and  
financial liability for guests and property during the use of city owned property.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*