

| CS - | Outdoor | Sport | Facility |
|------|---------|-------|----------|
|------|---------|-------|----------|

Community Services

OUTDOOR SPORT FACILITY RENTAL APPLICATION

| Contact Information (All applications must provide two contacts) SECTION 1 | | | | | |
|--|-------------------------------|---|--|--|--|
| Group/League | Main Contact | | | | |
| Address | City/Town | Postal Code | | | |
| Phone Number (Home) | (Work) | (Cell) | | | |
| Email Address | | | | | |
| Alternate Contact | (Phone) | (Cell) | | | |
| Email Address | | | | | |
| General Information (Equipment | / Bases Will Not Be Provided) | SECTION 2 | | | |
| Type of Field Requested | Type of League | Purpose of Usage | | | |
| | Men's | □ Practice | | | |
| ☐ Softball ☐ Football | Women's | □ Game | | | |
| ☐ Baseball ☐ Ultimate | Child/Youth | □ League | | | |
| □ Soccer | Co-ed | □ Tournament | | | |
| □ Other | | □ Other | | | |
| Field Rental Details SECTION 3 | | | | | |
| 1 st Choice | 2 nd Choice | 3 rd Choice | | | |
| Field | Field | Field | | | |
| os om ot ow ot of os | os om ot ow ot of os | os om ot ow ot of os | | | |
| Start Date Time | Start Date Time | Start Date Time | | | |
| Finish Date Time | Finish Date Time | Finish Date Time | | | |
| I acknowledge that this application is only a request. Rentals are not confirmed until all applicable fees are paid in advance of usage and a contract is signed. Please note that under certain | | | | | |
| circumstances, the option of a payment plan may be available. | | | | | |
| Applicant Signature | Date | | | | |
| Privacy Notice SECTION 4 | | | | | |
| Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is required to process this form. Questions about the collection and use of the information may be directed to the Recreation Division at 709-576-8631 / 576-8499 or recreation@stjohns.ca . | | | | | |
| For Internal Use Only SECTION 5 | | | | | |
| Form Received By | Date Form Received | | | | |
| Please send completed form to: | | or further information: none: 709-576-8499 | | | |
| H.G.R. Mews Community Centre 40 Mundy Pond Road | | mail: recreation@stjohns.ca | | | |

ST. J@HN'S