

PARK FACILITY PERMIT

Organization: _____

President: _____

Address: _____

Telephone: _____ Time: _____

Approx. Membership: _____ Date: _____

Name of League: _____

Number of Teams: _____ League Total: _____

League President: _____

Address: _____

Telephone: _____ Time: _____

League Season: _____

League Insurance: _____

Purpose of Use: _____

County Facility: _____

Park Manager: _____

Director of Parks: _____

Approved Denied

It is hereby understood that the use of any of these facilities may be revoked at any time ... just cause given.

Organizational or League President:

_____ Date: _____