



Athletic Scheduling - Field Application

Office Use Only Permit #

Seattle Parks & Recreation
Athletic Scheduling Office
300 Elliott Avenue West, Suite 100
Seattle, WA 98119

athleticfieldscheduling@seattle.gov

Office: 206-684-4077
fax: 206-615-0073

To be accepted your application must be completed and signed. Fill out in Adobe Reader, type or print information clearly and attach any additional information. Please use US mail, email or fax to submit your application.

1. APPLICANT INFORMATION

ORGANIZATION NAME:					
Mailing Address, City, State, Zip	Street Address:				
	City, State, Zip:				
Applicant Contact:	Name:				
	Title:				
Phone:					Cell:
Email:					
Date of Birth:			Gender:		
Race/Ethnicity:			Preferred Language:		
Do you have a City of Seattle business license? Yes / No			If yes, what is your UBI#		

2. FIELD USE DETAILS

Select a Geographic Area:	<input type="checkbox"/> NE	<input type="checkbox"/> NW	<input type="checkbox"/> SE	<input type="checkbox"/> SW	<input type="checkbox"/> Magnuson	
You can select your location by field name instead of the geographic area:						
Athletic Usage/Sport	<input type="checkbox"/> Baseball	<input type="checkbox"/> Softball	<input type="checkbox"/> Soccer	<input type="checkbox"/> Lacrosse	<input type="checkbox"/> Ultimate Frisbee	<input type="checkbox"/> Rugby
	<input type="checkbox"/> Football	<input type="checkbox"/> Flag Football		<input type="checkbox"/> Track & Field	Other _____	

3. FIELD USE INFORMATION

Is this request for youth or adult sports?	<input type="checkbox"/> Youth	<input type="checkbox"/> Adult
	<input type="checkbox"/> Practice	<input type="checkbox"/> Game
Is this request for a practice or a game?		
Event Dates: Indicate Dates		Hours: Indicate Times
Day 1	Day: _____ Date: _____	Start Time: _____ End Time: _____
Day 2	Day: _____ Date: _____	Start Time: _____ End Time: _____
Day 3	Day: _____ Date: _____	Start Time: _____ End Time: _____

Day 4	Day:	Date:	Start Time:	End Time:
Day 5	Day:	Date:	Start Time:	End Time:

Equipment / Set up:	Please check all boxes that apply
<input type="checkbox"/> Promotional Signage/Banners #'s ____	<input type="checkbox"/> Generators
<input type="checkbox"/> Inflatables/Bouncy Toys	<input type="checkbox"/> Staging/Scaffolding
<input type="checkbox"/> Portable Restrooms #'s	<input type="checkbox"/> Info Booths
<input type="checkbox"/> Grills	<input type="checkbox"/> Sales Booths
<input type="checkbox"/> Amplified Sound	<input type="checkbox"/> Tents/Canopies #'s ____
Please list on a separate piece of paper the outside companies/vendors that you are using for any of the checked boxes above:	

Please Check Items to Be Sold:	<input type="checkbox"/> Food	<input type="checkbox"/> Beverages	<input type="checkbox"/> Merchandise	<input type="checkbox"/> Services	<input type="checkbox"/> Other: _____
10% of all sales (food, beverages, admissions, participation fees, souvenirs, good and services) on Parks' property must be remitted to Seattle Parks and Recreation within 10 days following the event.					

4. FEES & PROCEEDS	Admission/Participation Fee?	Amount?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$

5. SIGNATURE	I certify that the information that I have provided on this application is true and accurate to the best of my knowledge. If the event plans change, I will submit a revised application or additional information accordingly. All information contained in this application is subject to public disclosure.	
	Applicant Signature	Applicant Printed Name
<p>By checking this box as an electronic signature, I agree to all the terms and conditions that may apply to the Athletics Scheduling Field Usage permitting process and agree that all information contained in this application is true and correct to my knowledge.</p> <p>All documents received by the Athletics Scheduling Office are public documents and subject to public disclosure in accordance with the Washington State Public Disclosure Act.</p>		