

Sports User Application Form

Email: allocations@saskatoon.ca

Telephone: (306) 975-3366

PART A: CONTACT INFORMATION

Organization		Organization Website:	
Mailing Address: (City, Province, and Postal Code)			
Primary Contact Name:			
Primary Contact Email:		Primary Contact Phone:	
Alternate Contact Name:			
Alternate Contact Email:		Alternate Contact Phone:	

PART B: SPORT & LEVEL OF PLAY

SPORT: <ul style="list-style-type: none"> <input type="checkbox"/> Baseball <input type="checkbox"/> Football <input type="checkbox"/> Lacrosse <input type="checkbox"/> Slo-pitch <input type="checkbox"/> Soccer <input type="checkbox"/> Softball <input type="checkbox"/> Ultimate Disc <input type="checkbox"/> Other _____ 	LEVEL OF PLAY: <ul style="list-style-type: none"> <input type="checkbox"/> Competitive League Play <input type="checkbox"/> Recreation League Play <input type="checkbox"/> Practice Time 	CATEGORY OF PLAY: <ul style="list-style-type: none"> <input type="checkbox"/> Adult Co-ed <input type="checkbox"/> Men <input type="checkbox"/> Women <input type="checkbox"/> Youth/Minor <ul style="list-style-type: none"> <input type="checkbox"/> Subsidized <input type="checkbox"/> Non-subsidized
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PART C: FIELD REQUESTS

FIELD SELECTION DETAILS

	Day(s) Requested: (ex. Monday)	Time(s) Requested:	Beginning Date/End Date	Field Location
1ST CHOICE				
2ND CHOICE				
3RD CHOICE				

***Please note: if you are booking UMEA or Newsham Soccer Fields between 7:00-11:00pm you must pay for the lights as well (\$31.00/hour)**

PART D: SPECIAL INSTRUCTIONS/REQUIREMENTS

Provide any additional information required for your league below.

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PART E: DECLARATION

Signature:		Date:	
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FOR OFFICE USE ONLY

Date Received:		Contract Number:		Liability Insurance Received:	
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