

2021 North Strabane Municipal Park Field Request

Organization Name: _____ Sport/Activity: _____

Contact Person: _____

Organization Address: _____

City: _____ St: _____ Zip: _____

Phone: _____

Email: _____

Other Contacts/Authorized Schedulers:

Name	Phone	Email

Age - Please select all age groups that make up your participants.

- Youth (ages 3-12)
- 13-18
- Adult (ages 19 and over)

Gender - Please select all genders that make up your participants.

- Male
- Female

Years in Existence: _____

Is your company a 501(c)(3) non-profit organization? (Must provide documentation) _____

What is your Employer Identification Number (EIN)? (Must provide copy of W-9) _____

Total Number of Teams: _____

Total Participants: _____

Total Canon-McMillan Based Participants (Must be able to verify): _____

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ONE WEEK PRIOR NOTICE REQUIRED FOR ALL CANCELLED USAGE DATES, OR FEES ARE NON-REFUNFABLE

CANON-MAC BASED GROUPS WHO DO NOT SUBMIT REQUESTS BY THE DEADLINE WILL FORFEIT THEIR CANON-MAC BASED YOUTH ORGANIZATION STATUS REGARDING SCHEDULING

USAGE FEES, Insurance Certificate, Organization W-9, Non-Profit Documentation, and Clearances **MUST** be submitted prior to start date. Use of Alcoholic Beverages is a violation and will result in immediate loss of field use and loss of deposit and fees.

I have read the North Strabane Township Field Usage Policy and understand field reservations are subject to availability and changes as determined by North Strabane Township.

Signature: _____ Date: _____

