



# Clark County Parks & Recreation

## Field Allocations Request Form

**Event Name:** \_\_\_\_\_  
**Name of Organization:** \_\_\_\_\_ **Organization Main #:** \_\_\_\_\_  
**Authorized Representative:** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Contact #:** \_\_\_\_\_ **Alt. Contact #:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_  
**National or State Affiliation Parent Organization:** \_\_\_\_\_  
**Total # of Teams:** \_\_\_\_\_ **Total # of Participants:** \_\_\_\_\_ **Organization Status:**  Non-Profit  Commercial  
**Activity:**  League  Tournament  Game  Practice  Camp **User Age Group:**  Youth (17 & under)  Adult (18+)  
**Sport:**  Baseball  Softball  Soccer  Football  Lacrosse  Other: \_\_\_\_\_

**PLEASE INDICATE IF ANY OF THE FOLLOWING ARE PLANNED AS A PART OF YOUR RESERVATION:**

**Sales of any kind:**  Yes  No **Food service or Concession stand:**  Yes  No **Alcoholic beverage service:**  Yes  No  
**Ticket sales or Admission fees:**  Yes  No **Fundraising:**  Yes  No

FACILITY NAME <i>Ex: Sunset Park</i>	LOCATION <i>Ex: 2601E.Sunset Rd.</i>	FIELD # <i>Ex: Field 7</i>	DAY(S) <i>Ex: Saturday</i>	TIME <i>Ex: 1p-8:30p</i>	DATE(S) <i>Ex: 1/31/15</i>

*Special Dates or Notes(No reservations on holidays):*

**REQUIRED DOCUMENTATION, AS REQUESTED**

Clark County is required to verify that organizations requiring a Business License or Charitable Registration are in accordance with Clark County Code Chapter 6 are in good standing with the Department of Business License. Please note that permits will not be issued until all information has been received and verified by the Department of Business License which may result in being unable to accommodate your initial request. To expedite, please submit copies of the following documentation with your request for reservation:

- A Certificate of Insurance listing Clark County NV as additionally insured (\$1 million per occurrence, \$2 million aggregate) will be required prior to the issuance of rental permit(s). Certificate Holder verbiage must match sample found in the manual.
- Documentation of Affiliation with State or National Parent Organization - if applicable (List on Form)
- League Schedule and Team List to confirm number of teams registered or Tournament Bracket, whichever applies.
- IRS 501C *(for Community Rate)*
- Clark County Charitable Registration *(for Community Rate)*
- State of NV Incorporation Status – if applicable
- Clark County Business License - if applicable

Please return completed form via email to [CCPRSsports@clarkcountynv.gov](mailto:CCPRSsports@clarkcountynv.gov), or fax to 702-455-8119 or mail to:

ATTN: Sports Unit  
 2601 E. Sunset Road  
 Las Vegas, NV 89120  
 702-455-8241

**FOR OFFICE USE ONLY**

**Approval / Denial Letter sent date:** \_\_\_\_\_ **Sent by:** \_\_\_\_\_ **Permit #** \_\_\_\_\_

<b>TOTAL FIELD USAGE:</b> 1 <sup>st</sup> 50% : _____ <b>Date Paid:</b> _____ 2 <sup>nd</sup> 50% : _____ <b>Date Paid:</b> _____	<b>LIGHT USAGE:</b> 1 <sup>st</sup> Month: _____ 2 <sup>nd</sup> Month: _____ 3 <sup>rd</sup> Month: _____ 4 <sup>th</sup> Month: _____ 5 <sup>th</sup> Month: _____ 6 <sup>th</sup> Month: _____
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