

# League Play/Tournament Facility Application Form

HRM Outdoor Sport and Community/Special Event Scheduling

P.O. Box 1749, Halifax, NS B3J 3A5 (902) 490-7100

League Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone(Home): \_\_\_\_\_ Business/Alternate: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone(Home): \_\_\_\_\_ Business/Alternate: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Event Name: \_\_\_\_\_

Sport to be played: \_\_\_\_\_

Type of League:  Adult  Minor  Co-ed  Female  Male

Did your league book HRM facilities last year?  Yes  No

Facilities Requested: (Please note: A confirmed season schedule may be attached instead of completing this section.)

Facility	Day	Time
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**\*\*A league schedule must be submitted before a contract can be issued.**

### Additional Information for Tournaments only:

Do you require Parks services prior to or during your event?  Yes  No

If yes, please list: \_\_\_\_\_

(Please note: there may be additional costs charged to the user for services provided by HRM staff)

Do you plan to request permission for a **Beer Garden?**  Yes  No

**A Tent?**  Yes  No

If yes, please see staff to obtain information regarding procedures.

**\*\*Please note....Vehicles are only permitted on site for the unloading and loading of equipment.\*\***

Will spectators be charged\*?  Yes  No If yes, list fee(s): \_\_\_\_\_

\* Please note: Amusement tax regulations stipulate that this tax must be collected when charging admissions.

I ACKNOWLEDGE THAT THIS IS ONLY A REQUEST AND THAT NOTHING WILL BE CONFIRMED UNTIL ALL APPLICABLE FEES ARE PAID IN ADVANCE OF USAGE AND A CONTRACT IS SIGNED.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Office Use Only:

Staff Receiving: \_\_\_\_\_ Date: \_\_\_\_\_