



CITY OF CALEXICO Athletic Field Permit Request



League/Person Name: _____ **Sport:** _____

Primary Contact: (League President)

Name:		Title:	
Address:			
City:		State:	
Home Phone:		Work Phone:	Fax:
Cell Phone:		Email:	
Zip:			

PLEASE COMPLETE THE COACHING STAFF REGISTRATION FORM (Attached)

Anticipated # of Teams:	Number of Players:
Age Groups:	
Cost p/Team: \$	Cost p/ Player: \$

Requested Usage:

Season	Winter	Spring	Summer	Fall
First Date of Play:			Last Date of Play:	
Days of the Week	Mon	Tue	Wed	Thurs
				Fri
				Sat
				Sun
Start Time:			End Time:	
Special Times:				

First Date of Playoffs:			Last Date of Playoffs:				
Days of the Week	Mon	Tue	Wed	Thurs	Fri	Sat	Sun
Start Time:			End Time:				

Requested Parks:

Adrian Cordova Memorial Park	Adrian Cordova Multipurpose Field	
Rodriguez Baseball Field	Rodriguez Park	
Alex Rivera Little League Field	Rodriguez Tennis Courts	
American Legion Softball Field	Rodriguez Baseball Field	
Crummett Park	Rodriguez Basketball Court	
Heber Park	Cortez Basketball Court	
Kennedy Gardens Park	Nosotros Softball Field	
Kennedy Gardens Baseball Area	Nosotros Basketball Courts	
Kennedy Gardens Basketball Court	Nosotros Multipurpose Field	

Requested Green Areas:

Joel Reisin Field (lights)	La Hacienda Retention Basin	
Daniel Gutierrez Soccer Field (lights)	Rancho Frontera & Meadows Retention Basin	
Las Casitas Field (lights)	Meadows & Rosas Retention Basin	
Carmen Estrada Field (lights)	Meadows & Holdridge Retention Basin	

Signature: _____ **Date:** _____



CITY OF CALEXICO

PARKS & RECREATION DEPARTMENT



Recreation Department, 707 Dool Ave., Calexico, CA 92231
Phone (760) 768-2176 Fax (760) 768-2194

MEMORANDUM OF UNDERSTANDING

The following information is to be provided to the Parks & Recreation Department:

- The league is to provide a copy of proof of insurance, showing the City of Calexico as additionally insured (minimum coverage limit of \$2 million).
- The league will submit a signed facility request form for each site.
- The league will provide a list of teams and the facility where they will hold practice and the contact information for each team leader.
- The league will provide an updated contact list of the league/sports board members.
- The league will provide a game schedule with locations.
- The league will provide a completed Athletic Field Use Allocation & Facility Request Application/forms.
- The league will notify all of their coaches that they will be required to be live scanned through the Parks & Recreation Department. (Live Scans available at the Calexico Police Department)
- All game fields may be used for practices but once a league starts the game fields are for GAMES ONLY.
- The league commits to clean & maintain the playing field, dugout, bleachers, snack bar and all other surrounding areas.
- The league will drag, mark and prep the field.
- The league is responsible to secure and lock all doors and gates after each game.
- The league is responsible for turning on and off the lights at the facility after each game.
- If the lights are left on, the league will be charged a fee to cover the city will incur for the employees overtime, should one be called to turn off lights.
- The league is responsible for removing any and/or all sponsorship banners by end of season.
- There is a \$500.00 deposit for the use of an electronic controller for a scoreboard.
- Submit All required forms to the Parks & Recreation Department at 707 Dool Ave.

I, _____ have read the following MOU and I am fully aware of the guidelines and conditions that are to be followed and will provide all of the information as requested by the Parks & Recreation Department.

Signature: _____ Date: _____



CITY OF CALEXICO COACHING STAFF REGISTRATION



League/Person Name: _____ **Sport:** _____

Primary Contact: *(League President)*

Name:		Title:	
Address:			
City:		State:	Zip:
Home Phone:	Work Phone:	Fax:	
Cell Phone:		Email:	

LIST OF COACHES (Must be Live Scanned through the Recreation Department before interacting with athletes)

NAME	ADDRESS	PHONE

(Attach additional sheets if needed)

Signature: _____

Date: _____

**CITY OF CALEXICO
 PARKS & RECREATION DEPARTMENT
 707 DOOL AVE.
 CALEXICO, CA 92231
 TEL (760) 768-2176 FAX (760) 768-2194**

REQUEST TO USE CITY PARKS

Reservations for park usage must be submitted at least seven (7) days in advance.

_____ Hereby request City of Calexico

 (Name of organization or person making request)

Permission to use _____
 _____ Name of park

Requested park area _____

For _____
 _____ Description of activity

_____ / _____
 Date of event time to time

TERMS AND CONDITIONS

I (we) shall be jointly severally responsible for any damages sustained to property and equipment during the use of park rental. I (we) will be responsible for clean up after use of park. I understand that no vehicles are to be parked in park area. **CONSUMPTION OF ALCOHOLIC BEVERAGES IN PARKS IS PROHIBITED. PARTIES AT COMMUNITY CENTER PARK** must park vehicles outside parking lot areas and use restrooms on north side of building. Only one jump house allowed per event. A restroom key deposit of \$75.00 (check or money order only) must be submitted prior to issuing key. A \$25.00 cleaning deposit is required. It will be reimbursed upon verification of leaving the park clean. Saturday and Sunday rentals must pick up key on Thursday, before 3:00 p.m. All keys must be returned to our office the next working day after your event, key deposit will then be returned. City agrees to have park areas clean for use by 11:00 a.m. **All City park rentals require a \$50.00 non-refundable fee (4 hour use.) Ball park lights requests require an additional \$50.00 non-refundable fee (4 hours use.) This form is only a reservation form and does not endorse any park event or activities. Some events and activities may require liability insurance, special permits and or special permission by the City.** It is the renter's responsibility to acquire and pay all necessary documents and permits if required. The City of Calexico reserves the right to deny use, suspend and or change rules of City Parks/Basins if it seems reasonable to reduce risk and damages to renters, community and or City Property.

_____ address _____ phone _____
 Print name

_____ date request submitted
 Signature

FOR OFFICE USE ONLY: approved by: _____ denied by: _____ Refer to: _____

payment: Check ___ (Check #) _____ Money Order ___ (Money Order #) _____ Waiver _____

City Receipt# _____ Notify: Police Department _____ Parks Department _____ Other _____

Comments/ Special Requests: _____