Charlotte County Athletic Field Usage Request Form

Organization: _____ **Address:** _____

Requested By _____ **Phone:** _____ **Email:** _____

Field (Check)		Field # (If known)
Ann Dever Park Memorial Park		
Carmalita Park		
Franz Ross Park		
Harold Avenue Park		
Maracaibo Park		
North Charlotte Regional Park		
South County Regional Park		
Tringali Hockey Rink		

Sport (Check)	
Baseball	
Basketball	
Cricket	
Equestrian	
Hockey	
Fitness Class	
Football	
Lacrosse	
Soccer	
Softball	
Tennis	

Function (Check)	
Rec.	
Comp.	

Age Level (Check)	
Adult	
Youth	

Lights (Circle; insert time)		
	Start	End
Yes		
No	NA	NA

Dates Requested	Date	Field #
Start Date		
End Date		
Start Date		
End Date		
Start Date		
End Date		
Start Date		
End Date		

Days (Check All That Apply)						
Sun.	Mon.	Tue.	Wed.	Thu.	Fri.	Sat

Times (Please Write In Start and End Time)						
Sun.	Mon.	Tue.	Wed.	Thu.	Fri.	Sat

Special Instructions/Requests: _____

This Section to be filled out by Charlotte County Staff									
Date Received	Date Processed	Initials	All Requests Met	Paid	Contract Sent		Contract Signed	Closed By	