



## Baseball Complex Tournament & Special Event Request Application

Name: \_\_\_\_\_ Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone (daytime): \_\_\_\_\_ Phone (evening): \_\_\_\_\_

Email Address: \_\_\_\_\_

Facility Requested (Circle all that applies):

Bobby Hopkins

Grey Strang

Kevin Calia

B-Field

C-Field

Date(s) Requested: \_\_\_\_\_

Daily Game Start Times: \_\_\_\_\_ Number of Teams: \_\_\_\_\_

### SERVICES REQUESTED

Admission Fee (gate): \_\_\_\_\_ NO \_\_\_\_\_ YES (if yes, please write price below)

Adult: \_\_\_\_\_ Youth: \_\_\_\_\_ Child: \_\_\_\_\_

Concession Stand Requested: \_\_\_\_\_ NO \_\_\_\_\_ YES

\*Oak Ridge Recreation and Parks reserves the right to cancel/reschedule any Tournament at any time due to concerns about field conditions.

\*For a complete application, you must also fill out and return the Certificate of Insurance, the Hold Harmless agreement, and the Policy Manual Acknowledgment Form.

Send Information to:

**Steve Stone**

City of Oak Ridge Recreation & Parks

P.O. Box 1

Oak Ridge, TN 37831

Phone: 865-425-3443

Fax: 865-425-3418

sstone@oakridgetn.gov

Date payment received:

For Office Use Only

Date request received:

For Office Use Only