

Clark County Parks & Recreation Field Allocations League Request Form

Name of Organization:		Organiz	Organization Status: □Non-Profit □Commercial						
National or State Affiliation	on Parent C	Organization:							
Mailing Address:									
City:	State: Zip Code: _		W	/ork #:					
1st Authorized Representa			Title:						
Mailing Address: City: State: _ Zip Code: Work #: 1st Authorized Representative: Title: Contact #: E-mail: Activity: □League □Game □Practice □Try-Outs □Other:									
2 nd Authorized Contact Na			E-mail:						
Sport. Dascoan disordan disoccer di oddan dilacrosse di rekledan domer.									
Total # of Teams:	Total # of Participants:User Age Group: \(\text{Touth (17 & under)} \) \(\text{Adult (18+)} \)								
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 Other:									
FACILITY NAME Ex: Sunset Park		RT/FIELD # : Field 11-14	TIME Ex: 1p-8:30p	DAY(S) Ex: Saturday	DATE(S) Ex: 1/1-7/31 or 8/1-12/31				
Special Dates or Notes (No reser	vations on ho	lidays) *include tr	y-out dates*						
REQUIRED DOCUMENTATION Clark County is required to verify that organizations requiring a Business License or Charitable Registration are in accordance with									

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.

- 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.
- O Documentation of Affiliation with State or National Parent Organization if applicable
- o State of NV Incorporation Status

o Clark County Business License

IRS 501C (for Non-Profit)

O Clark County Charitable Registration (for Non-Profit)

Please return completed form via email to <u>CCPRSports@clarkcountynv.gov</u>

FOR OFFICE USE ONLY								
Approval / Denial Letter sent date:		:	_ Sent by:	HH # Rsv/Permit #				
TOTAL FIELD & LIGHT USAGE (CONCESSIONS, IF APPLICABLE)								
1 st Month:	2 nd Month:	3 rd Month:	4 th Month:	5 th Month:	6 th Month:			

^{*}If your request is approved, you will receive an approval email listing the required documents. Closer to the start date, we will ask for additional information regarding the league.