



## ATHLETIC FIELD RENTAL APPLICATION

### PARK DISTRICT ORDINANCE 260 RULES AND REGULATIONS APPLY TO ALL PARK RENTALS

Renters must submit a complete application and accompanying paperwork at least two weeks before the event and are responsible for ensuring that event participants comply with all Park District, local, state, and federal guidelines current on the day of the event.

Revised 4/3/24

### GENERAL INFORMATION

The Arlington Heights Park District will not discriminate against eligible residents for participation on the basis of a disabling condition. We invite any resident with a special need to contact our staff upon submitting this application.

NAME OF APPLICANT/ ORGANIZATION AGENT \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/ST/ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

GENDER (F/M/NB) \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

ORGANIZATION NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATUS? Commercial  Non-profit

### SECOND PERSON THE PARK DISTRICT MAY CONTACT REGARDING THE RENTAL

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### EVENT INFORMATION

NAME AND TYPE OF EVENT \_\_\_\_\_

DATE \_\_\_\_\_ TIME (including setup and cleanup) \_\_\_\_\_

# OF PEOPLE ATTENDING\* \_\_\_\_\_ IS THE EVENT OPEN TO THE PUBLIC?\*  YES  NO

\*For events that are open to the public or have 100+ attendees, also submit a Large Event Rental Addendum.

IS THERE AN ADMISSION FEE FOR THIS EVENT?  YES  NO

If yes, what is the amount and purpose of the fee? \_\_\_\_\_

WILL YOU BRING ADDITIONAL EQUIPMENT OR FOOD ON SITE?  YES  NO

If yes, please describe \_\_\_\_\_

\_\_\_\_\_

**FACILITY REQUESTED:** 1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_

**SELECT AN AMENITY OR AMENITIES**

**BASEBALL DIAMOND:** '55/'60 BASE PEG \_\_\_\_\_  
'70 BASE PEG \_\_\_\_\_  
'80 BASE PEG \_\_\_\_\_

**SOCCER FIELD:** SMALL (7V7) \_\_\_\_\_  
MEDIUM (9V9) \_\_\_\_\_  
LARGE (11V11) \_\_\_\_\_

DO YOU NEED A FIELD WITH LIGHTS? \_\_\_\_\_ YES \_\_\_\_\_ NO

**EQUIPMENT** (additional fees apply)

\_\_\_\_\_ Port-o-let unit \_\_\_\_\_ five additional trash cans

**SIGNATURE OF APPLICANT**

**DATE**

\_\_\_\_\_

**FOR OFFICE USE ONLY**

Fee calculation
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\_\_\_\_\_ Date approved

\_\_\_\_\_ Supervisor

\_\_\_\_\_ Approved fee

\_\_\_\_\_ Superintendent

\_\_\_\_\_ Payment info sent

\_\_\_\_\_ Director

\_\_\_\_\_ Permit sent

\_\_\_\_\_ Executive Director