



City of Winter Park

Athletics Division
Field Request Form

Contract sent: _____

Received by: _____

Received: _____

Date: _____

Date: _____

*Please Print Clearly if not typed.
Complete all fields.

Name: _____

Mail to: City of Winter Park/Athletics
401 Park Ave. S.
Winter Park, FL 32789

Team/ League Name: _____

Billing Address _____

Fax to: 407-599-3454

City _____ State _____ Zip Code _____

Phone Number _____ Alt. Phone Number _____

email _____

Activity/ Sport: _____

Check the boxes you are requesting

Date Range

Time

Fields	
<input type="checkbox"/> Lake Island 1	
<input type="checkbox"/> Lake Island 2	
<input type="checkbox"/> Lake Island 3	<input type="checkbox"/> Cady Way 9
<input type="checkbox"/> Ward A	<input type="checkbox"/> Cady Way 10
<input type="checkbox"/> Ward B	<input type="checkbox"/> Showalter East
<input type="checkbox"/> Ward C	<input type="checkbox"/> Little League 1-8
<input type="checkbox"/> Ward D	

Date Range
(Start Date To End Date)- Note any dates in range you DO NOT WANT Include any special instruct.

Sunday	_____
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____
Friday	_____
Saturday	_____

Field Prep/ Lines- \$50/field Prep
Number of Week needing Lines: _____ X \$50= _____

+TAX

Proof of Insurance-----NO INSURANCE= NO PLAY Send Copy of Insurance with this form

After the Parks Department receives this form and based upon field availability, a rental agreement will be sent to the contact listed above. Until a signed agreement is in possession by both parties, NO RENTALS ARE CONFIRMED. Reservation Requests must be made at least 72 hours in advance.

Signed By

Date