

Luzerne County Recreation Coalition Forty Fort Recreation Complex

SOFTBALL FIELD PERMIT APPLICATION

Organization: _____

Applicant's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone (Day): _____ Phone (Night): _____

Circle each Softball Field Reserved: Field #1 Field #2 Field #3

Start Date: _____ End Date: _____

Typical Weekly Schedules:

Days:	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Times:	__ to __	__ to __	__ to __	__ to __	__ to __	__ to __	__ to __
# Hours							

Choose one:

For league use: # of teams _____ X \$225/team = \$ _____

For tournament use: # of days _____ X \$145/day/per field = \$ _____

For individual games: # of games _____ X \$75/game = \$ _____

Total fee: \$ _____ Amount Enclosed: \$ _____ Check #: _____

For final approval, applicant must provide full payment and a certificate of general liability insurance in the amount required listing both Luzerne County and the Luzerne County Recreation Coalition as additional insureds.

Approved by: _____ Date: _____ Permit #: _____

Make check payable, and Mail to: Luzerne County Recreation Coalition
5 Pine Tree Road, Mountain Top, PA 18707; (570) 474-5463