



COMMUNITY SERVICES & PARKS DEPARTMENT

FIELD RESERVATION REQUEST FORM

Responsible Person*: _____ Organization: _____

Phone: Day (____) _____ Evening (____) _____ Other (____) _____

Address of Responsible Person: _____

City State Zip Code

E-Mail: _____

**The responsible person must be at least 18 years of age. In addition, they are responsible for the activity and participant and spectator behavior from beginning to end.*

SECTION 1:

PLEASE FILL OUT ALL THE INFORMATION BELOW

Season Requested (Permits are done 3 months at a time on the following schedule):

- January - March April – June July – September October - December

Field(s) Requested: _____

Date(s), Day(s), & Time(s) Requested: _____

Any Alternative Date(s)/Day(s)/Times: _____

Description of Use: _____

Is this a recurring use? Yes No

SECTION 2:

Status of your group (Check one box ONLY):

- | | |
|------------------------------|--------------------------------|
| School (CIF games/practices) | Approved Community Youth Group |
| Local Non-Profit Youth Group | Local Youth Group |
| Youth Group | Local Non-Profit Adult Group |
| Local Adult Group | Adult Group |

Number of participants who will participate in activities: _____

Number of participants who will spectate: _____

(More Information on Back)

SECTION 3:

Insurance Company: _____

Agent's name: _____

If this is a one-time reservation or a casual Adult or Youth Group, you may provide Release of Liability Forms in lieu of insurance.

Recurring reservations for organizations must provide insurance. You will be required to provide the original policy a minimum of 14 days prior to the first date of permitted use. Renters may purchase insurance from Sparta or Knight Insurance if their policy does not meet the requirements of the City of Glendale.

No time is guaranteed until you receive a permit for the time and the fees have been paid.

Payment is due in full on a monthly basis. All reservations must be paid in advance of the time shown on your permit.

SECTION 4:

Please return this completed form via email or in person to the following sites:

Glendale Sports Complex

(For field reservations at the Glendale Sports Complex, and all citywide fields, except Pacific Park)

2200 Fern Lane
Glendale, CA 91208
(818) 937-7440
ComplexReservations@glendaleca.gov

Pacific Community Center

(For field reservation requests at Pacific Park ONLY)

501 S. Pacific Ave.
Glendale, CA 91204
(818) 548-4098
PacificReservations@glendaleca.gov

THIS IS A RESERVATION REQUEST AND DOES NOT GUARANTEE OR CONFIRM ANY RESERVATION. YOU WILL BE CONTACTED WITHIN THREE (3) BUSINESS DAYS REGARDING YOUR RESERVATION REQUEST. THANK YOU

FOR OFFICE USE ONLY:

SITE NAME _____ DATE RECEIVED _____ STAFF _____

DATE REVIEWED _____ SUPERVISOR OR DESIGNATED REPRESENTATIVE _____

APPROVAL CONDITIONS/FOLLOW-UP _____

DATE APPROVED _____ SUPERVISOR OR DESIGNATED REPRESENTATIVE _____