



**MNAP SOCCER FIELDS, BALL PARK & SKATE PARK,
ROTARY BALL FIELD APPLICATION**

District of Invermere, 914 – 8th Avenue, Box 339, Invermere, BC, V0A 1K0

Phone: (250) 342-9281 Fax: (250) 342-2934 E-mail: info@invermere.com

THE ALLOCATION PROCESS BEGINS MARCH 1. ALL APPLICATIONS RECEIVED AFTER FEBRUARY 28, WILL BE PROCESSED ON A FIRST-COME, FIRST-SERVE BASIS.

Where applicable, all applications should be made on behalf of leagues.

League/Affiliation Name: _____

Applicant's Name: _____ Email Address: _____

Address: _____ Postal Code: _____

Business Phone: _____ Home Phone: _____ Fax: _____

Alternate Contact: _____ Email Address: _____

Address: _____ Postal Code: _____

Business Phone: _____ Home Phone: _____ Fax: _____

Activity: Baseball Slow Pitch Softball T-Ball Football
Soccer Track & Field Other (specify) _____

SPECIAL EVENT/TOURNAMENT REQUEST

PLEASE COMPLETE THIS SECTION IF YOU ARE REQUESTING THE SINGLE ONE-TIME USE OF A FIELD OR IF YOU ARE ORGANIZING A SPECIAL EVENT OR TOURNAMENT.

Activity: _____

Number of fields required: _____

Dates Required: _____

DAY	LOCATION (S)	TIMES
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
SUNDAY		

Over...

LEAGUE REQUEST

Number of teams in league: _____

Age group of participants: · 17 year & under · 18 years & older

How many games per week does each team within your league play?

Is your group affiliated with a Provincial Sport Governing Body (ie Minor Baseball, etc) · Yes · No

Name:

Start & finish dates for league (ie May 1 - June 30): _____

Please note that in order to maximize facility usage, whenever possible we will be booking blocks of time. Scheduling staff will review each application and changes may be required.

DAY	LOACTION (S)	TIMES
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		
SATURDAY		
SUNDAY		

ANY SCHEDULE REVISIONS (ADDITIONS/DELETIONS) MUST BE REQUESTED IN WRITING BY THE APPLICANT

Additional Comments: _____

Applicant Signature

Date