

## **Application For Use – All-Weather Fields**

Facility Scheduling PO Box 1749, Halifax, NS B3J3A5 311(phone) / 902-490-4421(fax)

Once a contract has been approved, time will not be permitted to be cancelled. You will be responsible for full payment. Please provide a contact name and number for your organization that can be publicly disclosed if required.

OR	GANIZATIO		EVENT NAME									
СО	NTACT NAM	ΛE				EMAI	L					
ADDRESS				CITY	•		PROVINCE POS		POSTAL CODE			
HOME WORK			CELI	<u>_</u>		F	FAX					
ALTERNATE - CONTACT NAME						EMAI	L					
ADDRESS				CITY			P	PRC	OVINCE		POSTAL CODE	
HOME WORK			CELL			F	FAX					
	PE OF LEAG						T	TYPE OF SPORT BEING PLAYED				
	ADULT   Y	MALE   MAL										
DIE	YOUR LEA	Y LAST YEAR	?		IF YES, WHICH FACILITIES AND FOR WHAT PURPOSE?							
	☐ YES		10									
FA	CILITY REQ	UESTED										
	Mainland Common Field #1			Bedford/Hammonds Plains			S					
	Mainland Common Field #2				Cole Harbour	<u>,                                    </u>						
	Harbour East Field #1			Weir								
Harbour East Field #2												
							fields	. In	clude a DIAGRAM	l to clari	ify if necessary.	
					recommendation e of all set up req							
FIELD#				DAY					TIME			
ST	ART DATE		A gamo sch	odul	lo n	nuet ha euhmit	tod for	any				
			A game schedule must be submitted for any league usage before a contract will be issued.									
	YOU REQU		S SERVIC	ES PF	RIOR TO OR	IF YES, PLEASE LIST						
	YES											
There may be additional costs charged to the client for any additional services provided by municipal staff.												



## Application For Use – All-Weather Sport Fields Facility Scheduling PO Box 1749, Halifax, NS B3J 3A5

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DO YOU REQUIRE THE	<b>USE OR ACCE</b>	SS OF	DO YOU PLAN TO REQUEST PERMISSION FOR							
SCOREBOARD	☐ YES ☐ NO	0	A BEER GARDEN	☐ YES ☐ NO						
воотн	☐ YES ☐ NO	0	A TENT	☐ YES ☐ NO						
ELECTRICITY	☐ YES ☐ NO		If <b>yes</b> to any of these items, please see staff to obtain information regarding procedures.							
No motorized vehicles are pe permitted to park near the gat	rmitted within the ted entrances to u	fenced area of the onload and load equ	complex without written permipment.	ission from HRM staff. Veh	nicles are only					
Please indicate below ar	ny additional ed	quipment to be u	sed and how it will be ar	riving on site:						
DO YOU PLAN TO HAVI	E VENDORS ON	N SITE	YES NO							
IF YES, WHO ARE THE VENDORS AND WHAT PRODUCT(S) WILL THEY BE SELLING										
It is the responsibility of the ever			•							
WHAT IS THE ANTICIPATIONS BE		YES NO								
		YES	IF 1E3, LIST FEE3	DATE/TIME	NO					
SITE MEETING REQUIR	<b>E</b> D	169		DATE/TIME	NO					
HRM reserves the right to events at the expense of										
I ACKNOWLEDGE THAT TH SIGNED.	-	_		_						
SIGILES.										
will only be used by mu Halifax Regional Municip	unicipal staff and pality for purpose	l, if necessary, ind es relating to the o personal informat	nent Act (MGA), the persor dividuals and/or Organizati use of the Municipal Facilit ion, please contact the Acc or privacy@halifax.ca	ons under service contra ies. If you have any que	act with the stions about					
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