

Name of Organization: _____

YOUTH* ADULT

Youth*: At least 75% of the Organization's participants are 17 years of age or younger

Number of Teams (if applicable): _____

Total Number of Participants: _____

ARE YOU APPLYING ON BEHALF OF A:

TEAM: YES NO

LEAGUE: YES NO

TEAM Name- _____

LEAGUE Name: _____

****PLEASE NOTE:** It is very important that we have only one contact per group. If your contact person or address changes, please advise as soon as possible at (780) 357-7539 so we can keep our records up to date.

Representative Name: _____

Mailing Address: _____

Province: _____

Postal Code: _____

Phone: . _____

E-Mail Address: _____

YOU MUST NOTIFY US OF ANY CHANGES OR CANCELLED DATES SEVENTY-TWO (72) HOURS PRIOR TO YOUR BOOKING. IF NOT YOU MAY BE BILLED FOR THAT DATE.

THIS IS NOT A CONFIRMATION OF YOUR BOOKING

The personal information collected from you is collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy Act and will be used to administer facility bookings under the S.C.O.R.E.S. Joint Use Agreement. Questions about the collection of personal information should be directed to the City of Grande Prairie, CKC Coordinator - Bookings (780) 357-7539.

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- ACTIVITY -

Soccer
Football

Rugby
Other

If other Please specify: _____

Date	Time	Practice	Game	Field		# Dressing Rooms Required	Lights	Media Room	Ref Room	Meeting Room
				HALF	FULL					

Please email a copy of this form to:
Attention: CKC Coordinator - Bookings
Email: bookings@eastlinkcentre.ca

Office Use Only

Date received _____