



CITY OF MARTINEZ
RECREATION DIVISION

FIELD USE REQUEST FORM

Field or Fields Requested _____

Name of Organization _____

President/Authorized Representative _____

Address _____

City _____ Zip _____

E-mail address _____

Phone Number _____

Non-Profit Organization: Yes No Youth Program: Yes No

Non-Profit # _____

What sport(s) do you offer? _____

Please explain the types of program you offer

How much insurance do you carry per occurrence (not aggregate)? _____

How many athletes/players are in your organization? _____

How many are girls _____

What percentage of Martinez Residents do you have on your roster? _____

A Martinez resident is anyone living inside the designated city limits of Martinez. Pacheco residents and those living unincorporated areas of Martinez are not considered Martinez Residents. Please be ready to provide a roster with addresses for verification (do not provide it now).

What other fields do you use for your program (games and practices)? Please include other cities, school districts, etc.

What are your desired dates of use? Please attach additional sheet if more space is needed.

Dates	Days	Times

How and where do you market your programs?

Return to: Kara Galindo at kgalindo@cityofmartinez.org
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Walk-in: 525 Henrietta St, Martinez, CA 94553