



TOWN OF PAHRUMP FIELD ALLOCATION FORM

Organization: _____ Date: _____

Contact Name: _____

Cell Number: _____

Email: _____

Previous Season Statistics:

Total # of participants using Town of Pahrump Fields: _____

Total # of teams using Town of Pahrump Fields: _____

Projected Current Season Statistics:

Total # of participants using Town of Pahrump Fields: _____

Total # of teams using Town of Pahrump Fields: _____

The following is required and **MUST** be turned into the Town of Pahrump to maintain your reservation.

1. **The Park Fee is \$75 PER month, PER field.**
2. **A Security Deposit of \$300 (provided with submission of this form)**
3. **Liability Insurance Naming Town of Pahrump as the Additionally Insured.** (provided with submission of this form)

Petrack Park:

Fields: A _____ B _____ C _____

Months: _____

Days: _____ Times: _____

Ian Deutch Memorial Park:

Fields: 1 _____ 2 _____ 3 _____ 4 _____

Months: _____

Days: _____ Times: _____



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Simkins Park:

Field: Infield _____ Outfield _____

Months: _____

Days: _____ Times: _____

Special Dates: (Opening Day, Tournaments, Holiday Non-Playing Days, etc.)

Special Notes:

****REQUIRED FOR ALL SPORT ORGANIZATIONS** **GAME SCHEDULES MUST BE PROVIDED TO TOWN OF PAHRUMP STAFF WHEN CONFIRMED****