



APPLICATION

Application Selection: Recognized Sports Association (RSA)
 Partner Association (PA)

Facility Selection:

- Veterans Sports Complex | 4141 Bailey Road
- Centennial Park Softball Complex | 3219 McLean Road
- The Sports Complex at Shadow Creek Ranch | 13050 Shadow Creek Parkway (PA Only)
- Hickory Slough Sportsplex | 7600 Hughes Ranch Road

Name of Responsible Party: _____

Phone Numbers: Hm: _____ Wk: _____ Cell _____

E-mail Address: _____

Additional Contact: _____

Hm: _____ Wk: _____ Cell _____

Association Name: _____ **Non-Profit #** _____

Type of Fields Requested: _____ **Number of Fields Requested:** _____

Seasons: _____ **Date(s) of Rental:** _____

Registration Open and Closing dates: _____

Time(s) of Rental: Weekday – From: _____ To: _____ Weekend – From: _____ To: _____

THIS REQUEST IS FOR: (Check all that apply)

____ Softball ____ Football ____ Baseball ____ Lacrosse ____ Soccer ____ Other _____

FIELD ARRANGEMENTS: (Please indicate for Practices (P) and/or Games (G))

____ User will provide striping and dragging _____ Request City to provide striping and dragging

____ User will provide nets, flags, bases, etc. _____ Request City to provide nets, flags, bases, etc.

____ User will provide mowing _____ Request City to provide standard mowing practices

Historical Presence

What year did your association begin in the Pearland area? _____ What year was it founded? _____

What city facility has your Sports Association had use of and for how long? _____

Pearland Based Organization

Does your Sports Association have a non-profit status that identifies them as based in the City of Pearland? Yes / No

Pearland Resident Participation

Are at least 70% (RSA) or 51% (PA) of your Sports Associations participants Pearland residents? Yes / No

How many of your participants are residents? _____ Non-Residents? _____

Please submit the following with the application:

- RSA Application
- Certificate of Liability Insurance
- Previous year's financial statement
- List of RSA's Board of Directors with appropriate addresses and phone numbers
- IRS Letter of Non-Profit Designation (if applicable)
- Previous year's rosters with names and addresses
- Scheduled dates for season with lists of tryouts, practices, games and tournaments

I certify that the information I provided, and contained herein, is truthful. I do hereby affirm that no person shall be discriminated against on the basis of race, color, religion or national origin by my team/organization during the use of City of Pearland Parks and Recreation Department Facilities. I further hereby affirm to have read and agree to terms listed in the City of Pearland Parks & Recreation RSA Policy.

Signature of Applicant

Date

For Office Use

Date Application Received _____

RSA Status Approved _____ Declined _____

PA Status Approved _____ Declined _____

Beginning Date _____ End Date _____

Request and Field Arrangement Options Approved:

Request and Field Arrangement Options Declined:

Association Review Committee Designee

Date