

**CITY OF BARSTOW  
RECREATION DIVISION**

**APPLICATION FOR USE OF FACILITIES**

Today's Date: \_\_\_\_\_

Robert A. Sessions Memorial Sportspark Facility (circle all that apply):

Pavilion

Bating Cages

Volleyball Court

Basketball Court

Soccer Fields

Concession Stand(s) to be operated by contracted Concessionaire

Baseball/Softball Fields (specify fields, #) Upper \_\_\_\_\_ Lower \_\_\_\_\_

Lights/Ballfield Lights

Other

Date(s): \_\_\_\_\_

Time (set-up to clean-up) \_\_\_\_\_

Purpose of request:

\_\_\_\_\_

Anticipated number in attendance: \_\_\_\_\_

Will there be an admission charge (circle one)?: Yes/No

Is the purpose open to the public or a private event (circle one)?: Public/Private

Will alcohol be served (circle one)?: Yes/No

Will food/beverage be served or sold (circle one)?: Yes/No

Will non food/beverage items be sold (circle one)?: Yes/No

Name of responsible individual or organization: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #:        hm \_\_\_\_\_ wk \_\_\_\_\_ cell \_\_\_\_\_

Sports Complex special requirements:

\_\_\_\_\_ Stage \_\_\_\_\_ PA System \_\_\_\_\_ Bleachers \_\_\_\_\_ Lights \_\_\_\_\_ Concession Availability  
\_\_\_\_\_ Train \_\_\_\_\_ Other

Additional Notes/Comments:

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**Applicant certifies that he/she has received a copy of the Reservation/Rental Policy.  
Please initial: \_\_\_\_\_**

For Office Use Only

Rental Fee: \_\_\_\_\_  
Deposit: \_\_\_\_\_  
Lights: \_\_\_\_\_  
Labor: \_\_\_\_\_  
Stage: \_\_\_\_\_  
Train: \_\_\_\_\_  
PA: \_\_\_\_\_  
Bleachers: \_\_\_\_\_  
Total \$ \_\_\_\_\_

PERMIT FOR USE OF FACILITY

Approved ( ) Disapproves ( ) Staff Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Received: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Amount Received: \_\_\_\_\_ Receipt #: \_\_\_\_\_

Security Deposit Received: Yes ( ) No ( ) Cancellation Notice Received: \_\_\_\_\_

Business License # \_\_\_\_\_ Temporary Special Event Permit # \_\_\_\_\_

Temporary Food Facility Permit # \_\_\_\_\_