



Clark County Parks & Recreation Field Allocations **Tournament** Request Form

Event Name: _____
Name of Organization: _____ **Organization Status:** Non-Profit Commercial
National or State Affiliation Parent Organization: _____
Authorized Representative: _____ **Title:** _____
Contact #: _____ **E-mail:** _____
2nd Authorized Contact Name and #: _____ **E-mail:** _____
Mailing Address: _____
City: _____ **State:** _____ **Zip Code:** _____ **E-mail:** _____
Activity: Tournament Sports Event Camp Clinic Other: _____
Sport: Baseball Softball Soccer Football Lacrosse Other: _____
Total # of Teams: _____ **Total # of Participants:** _____ **User Age Group:** Youth (17 & under) Adult (18+)

PLEASE INDICATE IF ANY OF THE FOLLOWING ARE PLANNED AS A PART OF YOUR RESERVATION:

Sales of any kind: Yes No **Food service or Concession stand:** Yes No **Alcoholic beverage service:** Yes No
Ticket sales or Admission fees: Yes No **Fundraising:** Yes No **Other:** _____

FACILITY NAME <i>Ex: Sunset Park</i>	LOCATION <i>Ex: 2601E.Sunset Rd.</i>	FIELD # <i>Ex: Field 7</i>	DAY(S) <i>Ex: Saturday</i>	TIME <i>Ex: 1p-8:30p</i>	DATE(S) <i>Ex: 1/14-1/17/2022</i>
<i>Special Dates or Notes (No reservations on holidays):</i>					

REQUIRED DOCUMENTATION, AS REQUESTED

Clark County is required to verify that organizations requiring a Business License or Charitable Registration are in accordance with Clark County Code Chapter 6 are in good standing with the Department of Business License. Please note that permits will not be issued until all information has been received and verified by the Department of Business License which may result in being unable to accommodate your initial request.

- A Certificate of Insurance listing Clark County NV as additionally insured (\$1 million per occurrence, \$2 million aggregate) will be required prior to the issuance of rental permit(s). Certificate Holder verbiage must match sample found in the manual.
- Documentation of Affiliation with State or National Parent Organization - *if applicable*
- League Schedule and Team List to confirm number of teams registered or Tournament Bracket, whichever applies.
- IRS 501C *(for Non-Profit)*
- Clark County Charitable Registration *(for Non-Profit)*
- Policy Acknowledgment Form(s), to confirm receipt and acknowledgement of the Clark County Parks & Recreation Athletic Field Use & Allocation Policy.
- Rental Agreement, Applies to James Regional Sports Complex and Desert Diamonds Baseball Complex
- Key Request Form(s), if applicable

- State of NV Incorporation Status
- Clark County Business License

Please return completed form via email to CCPRSports@clarkcountynv.gov, or fax to 702-455-8119 or mail to:

ATTN: Sports Unit
 2601 E. Sunset Road
 Las Vegas, NV 89120
 702-455-8241

FOR OFFICE USE ONLY

Approval / Denial Letter sent date: _____ **Sent by:** _____ **HH #** _____
Permit # _____

TOTAL EVENT USAGE (VENDORS, IF APPLICABLE) _____ **APPROVED VENDORS:** _____

\$ _____