



# MSU FIELD ALLOCATION REQUEST YEAR \_\_\_\_\_ FALL SPRING

SPRING REQUESTS (USE MARCH-JULY) ARE ACCEPTED THE 4<sup>TH</sup> WED. IN NOVEMBER TO THE 2<sup>ND</sup> MON. IN DECEMBER.

FALL REQUESTS (USE AUGUST – FEBRUARY) ARE ACCEPTED THE 4<sup>TH</sup> WED. IN APRIL TO THE 2<sup>ND</sup> MON. IN MAY.

THIS IS A REQUEST FOR A FIELD ALLOCATION ONLY; IT DOES NOT GUARANTEE A FIELD USE PERMIT WILL BE ISSUED.

**PLEASE SUBMIT A SEPARATE REQUEST FOR DIFFERENT SPORTS AND FOR YOUTH LEAGUES AND ADULT LEAGUES.**

IF YOU HAVE QUESTIONS, PLEASE CALL (702) 229-1642 OR SEND AN EMAIL TO [MUNICIPALSPORTSUNIT@LASVEGASNEVADA.GOV](mailto:MUNICIPALSPORTSUNIT@LASVEGASNEVADA.GOV).

<b>MSU USE: RECEIVED BY</b>		<b>RECEIVED DATE</b>			
<b>SECTION A - ORGANIZATION INFORMATION</b>					
ORGANIZATION NAME					
COMPLETE MAILING ADDRESS			CITY	STATE	ZIP
MAIN CONTACT			DAYTIME PHONE	CELL PHONE	
TITLE	MAIN CONTACT DATE OF BIRTH		EMAIL ADDRESS		
ALTERNATE CONTACT			DAYTIME PHONE	CELL PHONE	
TITLE	ALTERNATE CONTACT DATE OF BIRTH		EMAIL ADDRESS		
IS ALTERNATE CONTACT NAMED ABOVE AUTHORIZED TO PAY FOR, SIGN AND PICK UP THE FIELD USE PERMIT FROM MUNICIPAL SPORTS UNIT?					
<input type="checkbox"/> YES <input type="checkbox"/> NO					
WEBSITE ADDRESS FOR ORGANIZATION			ORGANIZATION'S BUSINESS PHONE NUMBER		
<b>SECTION B- LEAGUE INFO</b>					
LEAGUE'S SPORT					
<input type="checkbox"/> BASEBALL <input type="checkbox"/> FOOTBALL <input type="checkbox"/> LACROSSE <input type="checkbox"/> SOCCER <input type="checkbox"/> SOFTBALL <input type="checkbox"/> _____					
# OF TEAMS REGISTERED IN LAST YEAR'S SEASON		# OF TEAMS ANTICIPATED IN REQUESTING SEASON		SELECT THE AGE GROUP THAT DESCRIBES YOUR LEAGUE PARTICIPANTS.	
				<input type="checkbox"/> YOUTH (0-17) <input type="checkbox"/> ADULT (18+)	
YEAR STARTED FIELD USE WITH CITY OF LAS VEGAS		FEDERAL TAX IDENTIFICATION NUMBER (EIN)		PRIORITY GROUP (PLEASE CHECK ONE)	
CLV BUSINESS LICENSE NUMBER		CLV BUSINESS LICENSE EXP DATE		<input type="checkbox"/> CITY OF LAS VEGAS PROGRAM <input type="checkbox"/> JOINT USE CONTRACTS, PARTNERSHIPS AND MOUS <input type="checkbox"/> NON-PROFIT YOUTH ORGANIZATION/COMMUNITY LEAGUE <input type="checkbox"/> NON-PROFIT ADULT ORGANIZATION/COMMUNITY LEAGUE <input type="checkbox"/> COMMERCIAL YOUTH ORGANIZATION/COMMUNITY LEAGUE <input type="checkbox"/> COMMERCIAL ADULT ORGANIZATION/COMMUNITY LEAGUE <input type="checkbox"/> OCCASIONAL USER (NON-LEAGUE, SHORT TERM)	
AFFILIATED WITH A NATIONAL ORGANIZATION? ( IF YES, PROVIDE ORGANIZATION NAME. IF NO, WRITE NO.)					
FIXED BUILDING CONCESSION PERMIT REQUESTED					
*ORGANIZATION MUST HAVE 501C NON-PROFIT DESIGNATION TO APPLY FOR A CONCESSION PERMIT					
CONCESSION LOCATION(S) REQUESTED			PREVIOUSLY SOLD CONCESSIONS?		
			<input type="checkbox"/> NO <input type="checkbox"/> YES		
LOCATIONS CONT.			SCOREBOARD AND SCOREBOARD CONTROLLER PERMIT REQUESTED		
PRODUCT(S) SELLING			SCOREBOARD LOCATION(S) REQUESTED		
			# SCOREBOARD CONTROLLER(S) REQUESTED		

APPLICATION CONTINUED ON PAGE TWO



## MSU FIELD ALLOCATION REQUEST PAGE 2

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<b>SECTION A - ORGANIZATION INFORMATION</b>							
ORGANIZATION NAME							
MAIN CONTACT				DAYTIME PHONE		CELL PHONE	
ALTERNATE CONTACT				DAYTIME PHONE		CELL PHONE	
SELECT THE AGE GROUP THAT DESCRIBES YOUR LEAGUE PARTICIPANTS.							
<input type="checkbox"/> YOUTH (0-17) <input type="checkbox"/> ADULT (18+)							
REQUESTED COMPLEX/FACILITY	# OF FIELDS NEEDED	DAY(S) OF WEEK	START DATE	END DATE	START TIME	END TIME	
<b>MSU Use: HH#</b>		<b>BUS Lic #</b>		<b>NON-PROFIT</b>		<b>CONCESSIONS</b>	
<b>RES #</b>		<b>CERT INS</b>		<b>SCOREBOARDS</b>		<b>VENDOR LIC</b>	