



## POST EVENT INFORMATION FORM

NAME OF SPORTING EVENT

NAME OF ORGANIZATION

**THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH THIS FORM TO THE MUNICIPAL SPORTS UNIT IN ORDER TO INITIATE THE REFUND OF THE COMPLEX SECURITY DEPOSIT:**

- A FINAL ACTIVITY/GAME SCHEDULE INCLUDING THE PUBLISHED SCORES MUST BE SUBMITTED OR IF AVAILABLE ONLINE, THE LINK TO THE ONLINE LISTING MUST BE PROVIDED
- THE TOTAL NUMBER OF TEAMS THAT PARTICIPATED IN THE SPORTING EVENT, THE NUMBER OF TEAMS FROM NEVADA AND THE NUMBER OF TEAMS FROM OUTSIDE OF NEVADA MUST BE PROVIDED IN THE PROMPTS BELOW

*NOTE: IF THE ABOVE REQUIREMENTS ARE NOT MET, THE SPORTING EVENT COMPLEX SECURITY DEPOSIT WILL BE FORFEITED.*

**TOTAL TEAMS PARTICIPATING IN EVENT**

**# OF TEAMS FROM NEVADA**

**# OF TEAMS FROM OUTSIDE OF NEVADA**

**IF AVAILABLE ONLINE, PLEASE PROVIDE THE WEB ADDRESS OF THE FINAL ACTIVITY /GAME SCHEDULE WITH PUBLISHED SCORES**

THE SECURITY DEPOSIT WILL BE RETAINED BY THE CITY OF LAS VEGAS UNTIL THE ORGANIZATION HAS PERFORMED ITS OBLIGATIONS TO THE CITY OF LAS VEGAS, INCLUDING WITHOUT LIMITATION, SUBMISSIONS OF ALL REQUIRED DOCUMENTS, AND THE CITY HAS DETERMINED THAT THERE IS NO DAMAGE OF ANY KIND SUFFERED BY THE SPORTS COMPLEX OR ATHLETIC FIELDS USED IN CONJUNCTION WITH THE SPORTING EVENT.

FOLLOWING YOUR SPORTING EVENT, THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE REQUESTED INFORMATION IN ORDER TO REQUEST THE REFUND OF THE COMPLEX SECURITY DEPOSIT.

APPLICANT AGREES THAT HE/SHE IS DULY APPOINTED AND AUTHORIZED TO MAKE AND SUBMIT THE ABOVE REQUEST IN THE NAME OF THE AFOREMENTIONED ORGANIZATION.

**AUTHORIZED ORGANIZATION REPRESENTATIVE'S SIGNATURE**

**DATE:**

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