



# Athletic Complex Rental Request Form

Return To: Metro Parks Tacoma  
 4702 S. 19th St. Tacoma, WA 98405  
 courtneym@tacomaparks.com

Date Submitted: \_\_\_\_\_ Name of Requester: \_\_\_\_\_

Organization: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Alternate Contact Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Activity Information:** *Please complete and/or check all items that apply – one event/tournament per sheet*

**Complex Request:**    SERA    Peck    Heidelberg    Maguinez Field

**Month** \_\_\_\_\_ **Date(s)** \_\_\_\_\_ **Start Time** \_\_\_\_\_ **End Time** \_\_\_\_\_

**Purpose of Activity:**    Tournament    League Game    Practice    Other \_\_\_\_\_

**Activity For:**    Men    Women    Coed    Youth    Other \_\_\_\_\_

**Sport to be played:**    Slowpitch    Fastpitch    Baseball    Soccer    Other \_\_\_\_\_

**Invitational / State / Regional / National** \_\_\_\_\_

**Entry Fee to be charged:** \$ \_\_\_\_\_ **# of teams expected:** \_\_\_\_\_

**Gate Admissions to be charged:**

**Daily Fees:**   Adult Rate \$ \_\_\_\_\_   Senior Rate \$ \_\_\_\_\_   Youth Rate \$ \_\_\_\_\_

**No Admission Fee to be Charged** *(See MPT policies regarding zero admission fee / additional rental fee applies.)*

Refunds or % Gate Receipts to be made out to: \_\_\_\_\_  
*(If different from above information)*

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Facility Rental Policies - Quick Reference** *Please see complete list of Athletic Complex rental policies*

1. Provide Metro Parks Tacoma, a **liability insurance policy, naming Metro Parks Tacoma as an additional insured, in the amount of \$2,000,000 no later than 7 days prior to the first date the facility will be utilized, or the tournament is subject to cancellation.**
2. Provide the Athletics Division of Metro Parks Tacoma, a **schedule of events no later than 3-5 working days prior to the first date the facility will be utilized.**
3. Balance (over and above the deposit) of the **rental fee must be paid no later than 3-5 working days prior to the first date the facility will be utilized.**
4. Alcoholic beverages are not allowed in any MPT athletic complex. All MPT complexes are no smoking facilities.
5. Selling of tournament souvenirs must be pre-approved by MPT. Please attach written request with description of items.
6. Failure to comply with MPT requirements may result in cancellation of the permit and the use of the facility and forfeiture of any deposits paid.

**Office Use Only**

Rental Fee: \$ \_\_\_\_\_  
 Deposit Due: \$ \_\_\_\_\_   Amount Paid: \$ \_\_\_\_\_   Date Paid: \_\_\_\_\_  
 Balance Due: \$ \_\_\_\_\_   Amount Paid: \$ \_\_\_\_\_   Date Paid: \_\_\_\_\_  
 Gate-Added Rental Collected: \$ \_\_\_\_\_   Less MPT Split: \$ \_\_\_\_\_   Gate Rental Split Due: \$ \_\_\_\_\_  
 Rainout Refund: \$ \_\_\_\_\_   Notes: \_\_\_\_\_