



Appendix A: Sport Field Permit Application Form

SECTION A – APPLICANT/CONTACT INFORMATION			
Name of Applicant		Applicant Phone #	
Applicant Address		Applicant Email	
Contact Name #1		Contact Name #2	
Phone #		Phone #	
Cell #		Cell #	
Fax #		Fax #	
*Email		*Email	

*The City will use these email addresses to contact you about field conditions and other important information*

SECTION B – ORGANIZATION INFORMATION	
What is the name of your	
What age group(s) do you represent?	
<input type="checkbox"/> Youth (less than 50%)	<input type="checkbox"/> Youth (more than 50%) <input type="checkbox"/> Adult
What type of sport do you represent?	
<input type="checkbox"/> Soccer	<input type="checkbox"/> Baseball <input type="checkbox"/> Softball
<input type="checkbox"/> Ultimate Frisbee	<input type="checkbox"/> Volleyball <input type="checkbox"/> Tennis
<input type="checkbox"/> BMX biking	<input type="checkbox"/> Other: please describe
How many teams are in your organization?	What is the total number of players in your organization?
How many hours do you require for games?	How many hours do you require for practices?
What is the percentage of Kingston residents in your organization?	

SECTION C – FIELD ALLOCATION REQUESTS				
Tell us your requested field locations and times in order of preference				
Date	Start Time	End Time	Practice or Game?	Field Name
			<input type="checkbox"/> practice <input type="checkbox"/> game	
			<input type="checkbox"/> practice <input type="checkbox"/> game	
			<input type="checkbox"/> practice <input type="checkbox"/> game	
			<input type="checkbox"/> practice <input type="checkbox"/> game	
			<input type="checkbox"/> practice <input type="checkbox"/> game	
			<input type="checkbox"/> practice <input type="checkbox"/> game	
			<input type="checkbox"/> practice <input type="checkbox"/> game	
			<input type="checkbox"/> practice <input type="checkbox"/> game	

*The City will make every effort to grant your field location/time requests; however, no request can be guaranteed.*

SECTION D – APPLICATION CHECKLIST				
Please submit the following information within two business days of your application (excludes tennis).				
Permit Fee	Insurance Certificate	Security Deposit	Key Deposit	Team Rosters
<i>All cheques must be made payable to the City of Kingston and submitted with your application. Failure to provide any of the above items will result in an automatic rejection of your application.</i>				

Notice of Collection  
 Personal information, as defined by the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), collected on this form, is collected and will be used in accordance with MFIPPA. The Personal information will be used by staff of the Corporation of the City of Kingston to register applications for sportsfields/tournaments/special events. Questions regarding the collection, use, and disclosure of this personal information should be directed to [sportsfields@cityofkingston.ca](mailto:sportsfields@cityofkingston.ca) or 613-546-4291 extension 1800