

DEPARTMENT OF RECREATION AND COMMUNITY SERVICES

2414 W. MITCHELL, MILWAUKEE, WI 53204

PHONE: (414) 647-6046 FAX: (414) 647-6079 EMAIL: OUTDOORPERMITS@MILWAUKEERECREATION.NET

OUTDOOR FACILITY PERMIT LEAGUE/TOURNAMENT APPLICATION

NAME OF ORGANIZATION:								
BILLING ADDRESS:		CITY:		ZIP:				
NAME OF CONTACT PERSON (S	5):							
PRIMARY PH#:	SECONDARY P	H#:	FAX #:	7				
E-MAIL ADDRESS:			TODAY'S	DATE:				
Outdoor facilities and permits are sulterminated immediately at the discrepresented on site in order to ensure	tion of the MPS Department of			_				
 A permit application must be submitted to Milwaukee Recreation. All sections of the permit application must be accurately completed in full. Missing information can delay the process. The completed application must be submitted a minimum of two (2) weeks prior to the event to ensure 								
proper processing. Organizations coordinating leag								
the Hourly Usage Rates. This fee is assessed to the organization based on the TOTAL number of teams participating in each league in the season. The Organizational League Fee is due one (1) week prior to the start of the league(s). The total Hourly Usage Rates for the season are due at the midpoint of the season. Any additional rain dates or extra days added must be paid for before they can be played.								
By signing below, I affirm that: I am outlined in the Outdoor Permit Rules which the entity fails to pay.								
Permit Requestor Signature	Date	Print Nam	e					
Organizations with multiple league requests may also use the reverse side of the application.								
NAME OF FACILITY/PLAYFIELD:								
DAY(S) OF WEEK:		START DATE:		END DATE:				
EVENT TIMES (ENTERING & LEA	AVING THE LOCATION):	AN	M/PM to	Д	M/PM			
TYPE OF LEAGUE: Baseba	II ☐ Softball ☐ I	Kickball	II ☐ Soccer	☐ Tennis	☐ Volleyball			
# OF PEOPLE EXPECTED:								
SPECIAL SERVICES REQUESTED: (bases, field lights, restroom access, field lining – additional fee required for most services. See the Outdoor Permit Rental Rate sheet for a full description of fees)								
DESCRIPTION OF ACTIVITY:								
Permit Application Permit	COFFICE USE ONLY (DEPART mit Application NIED	MENT OF RECREATION A Permit requires insurance: (Y/N)	MPS Su	•				

NAME OF TACHETY OF AVER									
NAME OF FACILITY/PLAYFIELD:									
DAY(S) OF WEEK:			RT DATE:		END DATE:				
EVENT TIMES (ENTERING &	LEAVING THE LOCATION	ON):	AM/F	PM to	A	M/PM			
TYPE OF LEAGUE: Base	eball Softball	☐ Kickball	☐ Football	Soccer	☐ Tennis	☐ Volleyball			
# OF PEOPLE EXPECTED:	TED. /h field liebte		field lining	- f f		Alamiasa Casallas			
SPECIAL SERVICES REQUEST Outdoor Permit Rental Rate	,		ss, field lining –	additional fee i	required for mo	ost services. See the			
DESCRIPTION OF ACTIVITY:					V 1.				
NAME OF FACILITY/PLAYFIE	ELD:								
DAY(S) OF WEEK:	START DATE: END DATE:								
EVENT TIMES (ENTERING &	MES (ENTERING & LEAVING THE LOCATION):		AM/PM to		AM/PM				
TYPE OF LEAGUE: Base	eball 🗌 Softball	☐ Kickball	☐ Football	☐ Soccer	☐ Tennis	☐ Volleyball			
# OF PEOPLE EXPECTED:									
SPECIAL SERVICES REQUESTED: (bases, field lights, restroom access, field lining – additional fee required for most services. See the Outdoor Permit Rental Rate sheet for a full description of fees)									
DESCRIPTION OF ACTIVITY:									
	16								
NAME OF FACILITY/PLAYFIE	ELD:								
DAY(S) OF WEEK:		STA	RT DATE:		END DATE:				
EVENT TIMES (ENTERING &	LEAVING THE LOCATION	ON):	AM/F	PM to	А	M/PM			
TYPE OF LEAGUE: Bas	eball	☐ Kickball	☐ Football	☐ Soccer	☐ Tennis	☐ Volleyball			
# OF PEOPLE EXPECTED:			C. 1.11. ·	1.155					
SPECIAL SERVICES REQUESTED: (bases, field lights, restroom access, field lining – additional fee required for most services. See the Outdoor Permit Rental Rate sheet for a full description of fees)									
DESCRIPTION OF ACTIVITY:									
	FOR OFFICE USE ONLY (I	DEPARTMENT OF	RECREATION AND	COMMUNITY SE	RVICES)				
Permit Application APPROVED	Permit Application DENIED	Permit	requires nce: (Y/N)	MPS Sup					