

Town of Pittsford Tournament/Large Event Application Form

Pittsford Recreation Department • 585-248-6280

TOURNAMENT/LARGE EVENT REQUEST PROCESS

- Applicant(s) must submit a Tournament/Large Event Application Form.
- Submit a Field Use Request Form.
- Submit a Certificate of Insurance naming the Town of Pittsford as additional insured for at least \$1,000,000 in general liability coverage.
- Submit team rosters with current addresses.
- Verification that all coaches and volunteers have gone through training and have been cleared with a background check.
- Applicant/group must send a completed Event Map with details.
- Upon approval of field use, a field use agreement will be sent confirming final reservations and fees (if applicable)

All tournament/event information needs to be communicated to the Pittsford Recreation Department at least 30 days prior to the tournament/event date

TOURNAMENT/LARGE EVENT INSPECTIONS & CERTIFICATIONS

- All Vendors, Tents, Scaffolds, and/or Bleachers are subject to inspection.
- Food Vendors must have all required Health Department Certifications.
- Use of Motorized Vehicles must be approved by Town of Pittsford.

TOURNAMENT/EVENT APPLICANT INFORMATION

Name of Tournament/Event: _____

Name of Group/Organization: _____

Address: _____

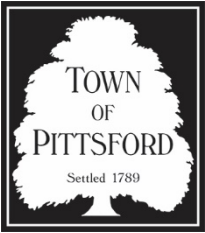
Town: _____ Zip Code _____

Email Address: _____

Primary Phone: _____

Name of On-Site Event Manager: _____

On-Site Event Manager Primary Phone: _____



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TOURNAMENT/LARGE EVENT REQUIRED INFORMATION

- Event Location(s): _____
- Event Date(s): _____ - _____ Event Time(s): _____ - _____
- Park Open & Close Times: Open: _____ Close: _____
- Estimated Attendance: _____ Parking Spaces Needed: _____
- Equipment Brought by Group: _____
- | | | | | | | | | | | | |
|--------|-----|--------------------------|-----------|-----|--------------------------|----------|-----|--------------------------|-----------|-----|--------------------------|
| Event | Yes | <input type="checkbox"/> | Directing | Yes | <input type="checkbox"/> | Trash | Yes | <input type="checkbox"/> | Security: | Yes | <input type="checkbox"/> |
| Staff: | No | <input type="checkbox"/> | Parking: | No | <input type="checkbox"/> | Removal: | No | <input type="checkbox"/> | | No | <input type="checkbox"/> |
- Tents (Sizes): _____
- Vendors (may require obtaining special permit): _____
- Motorized Vehicles (Golf Car, etc.): _____
- PA or Sound Equipment: _____

Answers to these questions may require additional follow up and/or permitting. Please allow for the required 30 day application process to ensure for the successful review and approval of your request

TOURNAMENT/EVENT CHECKLIST

- | | | | |
|-----------------------------|--|-----------------------------|--|
| 1. <input type="checkbox"/> | Submit Athletic Field Use Request Form | 3. <input type="checkbox"/> | Submit Event Map (Tents, Parking, Vendors) |
| 2. <input type="checkbox"/> | Submit Cert. of Liability Insurance | 4. <input type="checkbox"/> | Complete Event Required Information |

TOURNAMENT/EVENT POLICY

All required forms, certificates, permits, and information need to be submitted to the Recreation Department 30 days prior to the event date. Failure to submit any/all of the required information can cause in the cancellation of the event/tournament.

_____ Please initial to confirm that you have read and understand the above Policy.

OFFICE USE ONLY

Date Application Received: _____

Approved Location(s): _____

Date(s): _____ - _____ Day(s): _____ Time(s): _____ - _____

APPROVED

Recreation Director: _____ Field Supervisor: _____

DPW Commissioner: _____ Receipt #: _____