

Client Information Form



Please complete this form and submit with your Rental Request

League/Organization Name: _____

Youth- Male Youth- Female Adult - Male Adult - Female

Number of Teams: _____ Number of Players per Team: _____

Number of League Members: _____ Average Length of a Game:

Youth Leagues – Please provide age groups and the number of players per age group. Please attach a separate list if necessary.

League Executive and/or Alternate Contacts	
Title/Role: _____ Name: _____ Address: _____ City: _____ Postal Code: _____ E-mail: _____ (Work) _____ (Home) _____ (Cell) _____	Title/Role: _____ Name: _____ Address: _____ City: _____ Postal Code: _____ E-mail: _____ (Work) _____ (Home) _____ (Cell) _____
Title/Role: _____ Name: _____ Address: _____ City: _____ Postal Code: _____ E-mail: _____ (Work) _____ (Home) _____ (Cell) _____	Title/Role: _____ Name: _____ Address: _____ City: _____ Postal Code: _____ E-mail: _____ (Work) _____ (Home) _____ (Cell) _____