



## 2018/19 Client Information Form – League/Organization Only

Complete this form and submit with your Facility Request.

League/Organization Name: \_\_\_\_\_

Minor - Male  Minor - Female  Adult - Male  Adult - Female

#of Teams: \_\_\_\_\_ #of Players per Team: \_\_\_\_\_

#of Members: \_\_\_\_\_ Average Length of a Game: \_\_\_\_\_

Minor Leagues – Please provide age groups and the number of players per age group.

You may attach a separate list if required.

### League Executive and/or Alternate Contacts:

Please indicate preferred # to contact for each contact.

<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>Postal Code: _____</p> <p>E-mail: _____</p> <p>Phone #: (Work) _____</p> <p>(Home) _____</p> <p>(Cell) _____</p>	<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>Postal Code: _____</p> <p>E-mail: _____</p> <p>Phone #: (Work) _____</p> <p>(Home) _____</p> <p>(Cell) _____</p>
<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>Postal Code: _____</p> <p>E-mail: _____</p> <p>Phone #: (Work) _____</p> <p>(Home) _____</p> <p>(Cell) _____</p>	<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>Postal Code: _____</p> <p>E-mail: _____</p> <p>Phone #: (Work) _____</p> <p>(Home) _____</p> <p>(Cell) _____</p>