

SportsPark Facility/Tournament Request Application

Facility or Tournament Date(s)(Circle One)	(Only one service request per application)
Name	Organization
Address	
CitySta	ateZip Code
Phone (daytime) Phone (evening)	
Fax Number En	mail Address
Daily Game Start Times	Number of Teams
Tournament Classification	
State/National Championship	Yes No
Association/Affiliation	
SERVICE REQUESTED Number of fields requested:	
Football/ Rugby/Soccer/Ultimate Frisbe	e/Lacrosse 12345
Admission (gate)YesNo (If yes, what will be the cost?) Adult Youth Tournament Pass
Souvenir SalesYesNo	Meeting Room Needed?YesNo
How many vendors/type?	<u> </u>
You may be ask to supply additional securi by Knox County Parks and Recreation if dec	ty and or trash pick-up for your event at your expense emed necessary!
Send Information to: Jennifer Gentry Knox County Parks & Recreation 2447 Sutherland Avenue Knoxville, TN 37919 Phone: 865.215.6609 Fax: 865.215.6603	Date request received: For office use only
	Date payment received:
<u>Jennifer.gentry@knoxcounty.org</u> Website <u>www.knoxcounty.org</u>	For office use only

Print Form