

Event Number: _____

SCG SOFTBALL FACILITY: Special Event Application

Date of Filing: _____ Event Date(s): _____

Number of games to be played: _____

Type of Event (tournament, charity, instructional clinics, inter-community games e.g. Festival, SCW Women):

Club Member Responsible (Chairperson) for overall conduct for the event, ensuring Club rules are enforced and proper opening/closing of the field (*info can be found in Player/Manager /SB Field Opening Closing Duties doc on website) _____

Member Phone: _____ Member email: _____

Will there be notification of the event by email/published article? Yes ____ No ____

If charity event, who has the fiduciary responsibility and who is/are recipients?

Is food to be served? (Reminder SCG does not allow food sales unless operation has Health Dept. license) Yes ____ No ____
(If considering food/beverage cart please contact The Grand CAM Office to obtain the current Food and Beverages vendor)

If Public Address System required: Contact the Softball Club's PA coordinator. Currently Roger Neumann (neumann2000@cox.net) or the Softball Club's Board to obtain the current person

Special Concerns/Questions/Comments:

Chairperson/Member Coordinating Event will be:

- The primary contact for the Director of Field Operations
- *Responsible for opening and closing the field as described in Manager Duties doc on website
- Responsible for lining the field, scoreboard operation and umpires
- Responsible for following all SCG Softball Club Safety precautions and injury protocols and adherence to SCG Code of Conduct

Note: Field preparation mowing & dragging will be accomplished by the field maintenance crew.

AGREE TO TERMS: _____ Date: _____
Event Coordinator

APPROVED: _____ Date: _____
Director of Field Operations