MORENO VALLEY PARKS AND COMMUNITY SERVICES REQUEST FOR USE OF ATHLETIC FIELDS AND PARK FACILITIES

Today's Date:_		Organiz	zation:		
Division: Te				Ages:	
Applicant Name:				City/Zip	
Mailing Address:Signature:					
				Facility	
Describe Activ	/ity:			Sound?	
Request for ad	Iditional servi	ces/Facilities (ac	dditional fees may	apply): Snack Bar ()	
		FOR	OFFICE USE ON	LY	
Comments:				54	
				Approved ()	
Authorized Sig	nature:		•	Date:	
Fee			Comments		Receipt No.
\$					
	tal				
Received By:_				Date:	
ALL APPL	ICANTS MU	ST READ AND	SIGN THE WAIV	ER AND HOLD HA	RMLESS FORM

Revised May 2008