



Columbia Parks & Recreation Department
Tournament Application

Applicant Name: _____ Date: _____

Address: _____
City State Zip

Applicant E-Mail: _____

Home Phone # : _____ Work # : _____ Cell # : _____

Name of Tournament: _____

Tournament Director: _____

Tournament Dates: _____

Hours: Friday _____ Saturday _____ Sunday _____

Number of Teams: _____ Number of Fields: _____ Use of Lights: _____

Type of Tournament: _____ Softball _____ Baseball _____ Football

Round Robin Men
Double Elimination Women
Single Elimination Co-ed Youth

Gate Admission: _____ (Amount Per Person \$ _____)
(Tournament May Not Charge For Parking)

Date Applied: _____ Received copy of Guidelines: initials: _____

Applicant will be required to submit a \$200.00 Field Rental Fee to be applied toward the final cost of the field rental.

Applicant Signature: _____ Date: _____

For Office Use Only

Amount of Deposit: _____ Receipt: _____

Approved By: _____ Date: _____