



Park District Of Oak Park

ATHLETIC FIELD/COURT PERMIT APPLICATION

218 Madison St
Oak Park, IL 60302
(708) 725-2721 (info)
(708) 383-5702 (fax)
permits@oakparkparks.com
www.oakparkparks.com

INSTRUCTIONS: Please complete and submit this application for review to the location listed above at least 2 weeks prior to the date of your event.

PLEASE NOTE: This form is a "request" and does not serve as the actual permit. All applications must be approved by the Park District. Once approved, you will receive written confirmation and a copy of your approved permit application via e-mail. You can expect to receive a response regarding your application 5-7 business days after it has been submitted. Park District of Oak Park begins accepting permit applications on April 1 for events taking place May 1—October 15 of the same year.

APPLICANT INFORMATION

ORGANIZATION /GROUP NAME (if applicable)

ORGANIZATION CONTACT

STREET ADDRESS

APT/UNIT/SUITE

CITY

STATE

ZIP

DAYTIME PHONE

FAX

CELL PHONE

E-MAIL ADDRESS

SIGNATURE (By signing below, I agree to follow Park District Rules & Regulations Governing Uses of Park Facilities.)

EVENT INFORMATION

TYPE OF ACTIVITY OR SPORT

AGE OF PARTICIPANTS (check all that apply)

NUMBER OF INDIVIDUALS ATTENDING

5 & Under 6-12 13-17 Adult

FIELDS/COURTS WILL BE USED FOR (check all that apply)

Practices Games Tournaments Open Play Other (Please specify):

EVENT DESCRIPTION (Provide a detailed description of your event, including any equipment such as tables, chairs, pop-up tents, etc. that will be brought in. Documents with this information may be attached.)

SPECIAL REQUESTS (subject to availability; will result in additional fees)

Restrooms Lights Electricity Tables & Chairs Other (Please specify):

LOCATION REQUESTS

PARK REQUESTED	FIELD(S)/COURT(S) NEEDED	START DATE	END DATE	DAYS OF THE WEEK	TIME
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FOR OFFICE USE ONLY

Received by: _____ on: _____ at: _____ Approved by: _____ on: _____
(Initials) (Date) (Time) (Initials) (Date)

Entered Into RecTrac: _____
(Reservation #)

Confirmation Sent to Applicant: _____
(Date)

NOT VALID
WITHOUT
STAMP