**SPORTS CAMP CHECKLIST**

City of Bellevue

Parks & Community Services

Parks Scheduling Office

PO Box 90012

Bellevue, WA 98009-9012



**Please submit one checklist for each session of camp.**

**Camp Name:**      

**Camp Director:**      

**Work Phone:**       **ext.**       **Cell Phone:**

**Address:**       **City:**       **State:**    **Zip:**      

**On-Site Coordinator:**

**Cell Phone: (**   **)**    -     **Alternate Phone: (**   **)**    -    

**Date(s) of Camp:**     

**Field(s):**     

**Camp Days:**

**Check:**  Monday  Tuesday  Wednesday  Thursday  Friday  Other

**Time at Field:** Setup Starts:       Take-down Finishes:

**Program Time(s):**

      To

      To

**Type of Camp:**

**Check one:**  Baseball  Softball  Soccer

Lacrosse  Other or Multi-sport:

**Basepath Length for baseball and softball:**

**Check one:**  60'  65'  70'  80'  90'  None

***Please indicate which of the following are applicable to your event:***

*(Please note: Not all of these options are available at all fields. Some have additional requirements and fees.)*

**Comments**

**Portable toilets**

**Water Access**

**Vehicle Access**

**On-Site Storage**

**Electrical Access**

**Rental Equipment**

**Field Maintenance**

**Delivery of Supplies/Equipment**

**Use of School-owned Equipment**

**Other (please specify)**

**CC: Ballfield Maintenance**

**Resource Management**

**Bellevue School District**

Questions? Contact the Parks Scheduling Office at (425) 452-6914 or [BallfieldRental@bellevuewa.gov](mailto:BallfieldRental@bellevuewa.gov)