SPORTS FACILITY USE
PERMIT APPLICATION
BASEBALL/SOFTBALL

Allocation Period: ☐ January-June *(due 09/30/25)*
☐ July-December *(due 03/31/26)*

City of Tracy
Parks & Recreation Department
Aquatics, Athletics & Community Facilities

333 Civic Center Plaza
Tracy, CA 95376

Telephone (209) 831-6201
Fax (209) 831-6218

APPLICANT INFORMATION *(Please Print Clearly)*		
Organization Name:		
Address/City/State/Zip:		
Classification: ☐ Non-Profit Organization ☐ Private Citizen ☐ Commercial (for profit) Business		
Sport:	**Age Group:** ☐ Youth (17U) ☐ Adult (18+) (*Youth/Adult Leagues must be submitted on separate apps.*)	**Total # Org. Members:** *(Attach current rosters with addresses)*
Applicant Name: *(Authorized to act on behalf of org.)*		**Date of Birth:** *(Must be 21 or over)*
Applicant Org. Title: *(Manager, Coach, President, etc.)*	**Email:**	
Cell Phone:	**Alt. Phone:**	
On-Site Contact Person:	**Contact Person's Cell Phone:**	
SEASON INFORMATION		
Event Date/Date Range: *(Attach additional sheets as needed)*		**Season Reg. Deadline:**
Skip Dates: *(holidays, school breaks, etc.)*		

FACILITY INFORMATION *(* = Lights available; practices/games must end by 10pm.)*

Rank Preferred Location(s): *Rank preferred fields (1=1st choice.)*	**# Fields Requested**	**Preferred Field(s):**	**Base Distance:**	**Day(s)** *(e.g. Tu/Th)*	**Start→End Times:** *Include setup/cleanup*
___ Clyde Bland Park		☐ Ballfield	☐ 60' ☐ 65' ☐ 70'		
___ Galli Family Park		☐ Ballfield	☐ 60' ☐ 65'		
___ Legacy Fields West Ballfields*		☐ Any Field(s) OR ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 60' ☐ 65' ☐ 70'		
___ Legacy Fields East Ballfields*		☐ Any Field(s) OR ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 60' ☐ 65' ☐ 70'		
___ Tiago Park *(grass infield)*		☐ North ☐ South	☐ 60'		
___ Ritter Family Ball Park – North*		☐ Ballfield / Outfield	☐ 90'		
___ Ritter Family Ball Park – South*		☐ Ballfield / Outfield	☐ 60' ☐ 65' ☐ 70'		
___ Tracy Sports Complex Ballfields*		☐ Any Field(s) OR ☐ 1 ☐ 2 ☐ 3 ☐ 4	☐ 60' ☐ 65' ☐ 70'		
___ Veterans Memorial Park*		☐ Ballfield	☐ 60' ☐ 65'		

TSC/Legacy ballfield scoreboards: ☐ NO ☐ YES

Softball fences (TSC ballfields only): ☐ NO ☐ YES: Fields: ☐ 1 ☐ 2 ☐ 3 ☐ 4 (*add'l fee per field applies)*

Field Prep (initial full prep included):** ☐ Chalking ☐ Light Watering ☐ Light Field Prep ☐ Full Field Prep

*** Email game field prep requests to sportsfields@cityoftracy.org by Monday week prior to game. Fees apply.*

Admission Charged? ☐ NO ☐ YES (*add'l gate fee)* | **# Vehicle Access permits:** _____ *(add'l fee per vehicle)*

OTHER SERVICES & AMENITIES

Amplified Sound: ☐ NO ☐ YES (City permit required for amplified sound)

Power: ☐ NO POWER ☐ YES *(Power access not available at all facilities)*

FOOD PREP/FOOD VENDORS (Food vendors NOT permitted at Tracy Sports Complex and Legacy Fields)

Approved Food Vendors to include on permit (list vendor names and requested locations):

☐ Each food vendor must display a business license and all applicable food safety certifications.

MERCHANDISE VENDORS/ INFORMATION BOOTHS

Approved Merchandise Vendors to include on permit (list):

☐ Each merchandise vendor must have a business license.

OTHER SCHEDULING NOTES (Attach additional sheets as needed)

REQUIRED ATTACHMENTS (All listed documents must be attached to application for each allocation season.)

- ☐ Proof of non-profit status, if applicable
- ☐ Current certificate of insurance and endorsement page
- ☐ Map(s) showing planned field lining with dimensions for each field requested
- ☐ Signed Acknowledgement Form from *2026 Sports Field Reservation Handbook*.
- ☐ Updated Authorized Agent List
- ☐ Current or most recent season league rosters in Excel format *(current within one calendar year)*

PAYMENT PREFERENCE

- ☐ Pay in full at time of booking
- ☐ Monthly Payment Plan: *Permit holder is responsible for making monthly payments by 15th of each month to avoid suspension/cancellation of permit. Payments can be delivered, mailed, or paid online with a credit card.*

INDEMNITY, HOLD HARMLESS, AND DEFENSE AGREEMENT

Permittee shall indemnify, defend, and hold harmless the City of Tracy (including its elected officials, officers, agents, volunteers, and employees) from and against any and all claims, demands, damages, liabilities, costs, and expenses (including court costs and attorney's fees) resulting from or arising out of Permittee's performance of the activities permitted under the Permit to which this Agreement was required as part of the application process.

I declare that I am authorized to make this application and to agree to this Indemnity, Hold Harmless, and Defense Agreement, and, to the best of my knowledge and the belief, all the information given herein is true, accurate, and complete. I have read and understand the above Indemnity, Hold Harmless, and Defense Agreement and understand that if this application is approved, that this agreement shall be binding upon myself and the organization or group I represent.

By signing this Agreement, I ACKNOWLEDGE THAT I HAVE BEEN AFFORDED THE OPPORTUNITY TO HAVE COUNSEL OF MY CHOOSING ADVISE ME, AND THAT I HAVE READ AND UNDERSTAND AND VOLUNTARILY AGREE TO THIS INDEMNITY, HOLD HARMLESS AND DEFENSE AGREEMENT.

Applicant Signature: _____ **Date:** _____