

Request for Facility Use Form must be submitted ten (10) days before the first day of facility use.

Athletics Division

Request for Facility Usage

Thank you for reaching out. I will be more than happy to assist you with facility usage. Please provide the following information and return via email to Athletics@Savannahga.gov

Primary Contact:

Name _____

Address _____ City _____ ST. _____ Zip _____

Telephone Number _____

Email Address _____

Organization Name _____

Event Type _____ *Practice* _____ *Game* _____ *Tournament* _____ *Other* _____

Event Location (site) _____

Date of Event _____ Alternative Date _____

Time _____

Services Requested: Game Clock _____ Other _____ Special Instructions _____

Facility will be used for what purpose? _____

Estimated number of attendees? _____

Is this event for YOUTH? YES _____ No _____

Will an admission be charged? YES _____ No _____

Will food be sold? YES _____ No _____

Security will be arranged by our office and billed to the user at a hourly rate. Security is provided by **Savannah Police Department**.

ALCOHOL, TABACCO, DRUGS, AND WEAPONS ARE PROHIBITED ON THE PROPERTY

To be completed by PAULSON Complex Personnel

Date Request Received _____

The estimated charges are based upon the information provided by the requestee.

Permit Fee: \$ _____

Site Operator: \$ _____

Security: \$ _____

Total: \$ _____

A Facility Permit will be emailed 3 days prior to your event

APPROVED	
DENIED	

Athletics Representative

Date