



**ROCKDALE**  
Independent School District

## Athletic Facility Use Application

Date of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_ Athletic Facility Requested: \_\_\_\_\_

Home Team: \_\_\_\_\_ District : \_\_\_\_\_ Home Team Colors/Mascot: \_\_\_\_\_

Visitor Team: \_\_\_\_\_ District : \_\_\_\_\_ Visitor Team Colors/Mascot: \_\_\_\_\_

Conference: \_\_\_\_\_ Region: \_\_\_\_\_ Level: \_\_\_\_\_ Ticket Prices Adult: \_\_\_\_\_ Student: \_\_\_\_\_

Passes Accepted: \_\_\_\_\_

Arrival Time: \_\_\_\_\_ Doors/Gates Open at: \_\_\_\_\_ Home Team Warmup Time: \_\_\_\_\_ Visiting Team Warmup Time: \_\_\_\_\_

Facility Rental Fee: \$ \_\_\_\_\_ Inclusions/Exclusions for Rental Fee: \_\_\_\_\_

### Home Team Contact Information:

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
City/St/Zip \_\_\_\_\_ Fax # \_\_\_\_\_  
E-mail \_\_\_\_\_

### Visitor Team Contact Information:

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_ Cell Phone # \_\_\_\_\_  
City/St/Zip \_\_\_\_\_ Fax # \_\_\_\_\_  
E-mail \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature- Home Team      Date

\_\_\_\_\_  
Applicant's Signature- Visitor Team      Date

\_\_\_\_\_  
RISD Athletic Approval      Date