

**City of Schofield**  
**200 Park Street**  
**Schofield, WI 54476**  
**715/359-5230**

**BALL DIAMOND RESERVATION REQUEST FORM**

Company/Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Ball Diamond Requested:  Grace Street

Mayor's Park (Spring St)

Single Date(s)/Time(s) Requested:

Date	Start Time	(circle one)	End Time	(circle one)
/ /	:	a.m. p.m.	to :	a.m. p.m.
/ /	:	a.m. p.m.	to :	a.m. p.m.
/ /	:	a.m. p.m.	to :	a.m. p.m.
/ /	:	a.m. p.m.	to :	a.m. p.m.
/ /	:	a.m. p.m.	to :	a.m. p.m.
/ /	:	a.m. p.m.	to :	a.m. p.m.
/ /	:	a.m. p.m.	to :	a.m. p.m.

Multiple Date/Time(s) Requested:

From: \_\_\_\_\_ to \_\_\_\_\_, 20\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Ball diamond requests are on a "first come, first serve" basis.

\_\_\_\_\_  
*Signature of Contact Person*

\_\_\_\_\_  
*Date*