

## St. Ann Catholic Church Field Reservation Form

Non-CYO Football   
  Soccer   
  Baseball/Softball   
  Lacrosse

Team Name		
Adult Coach In-Charge		% of Kids From Parish
Address		City/State/ZIP
Home #	Work #	Cell #
E-Mail Address		
Age of Participants	Grade	Boy/Girl

Weekday Practice Times	3:30-5:00pm	5:00-6:30pm	6:30-8:00pm
Sat. & Sun. Practice Times	8:00-9:30a*	9:30-11:00a*	11:00a-2:30p 12:30-2:00p

1 <sup>st</sup> Practice Time Preference	Day of Week	Time Slot
First Choice		
Second Choice		
Third Choice		

2 <sup>nd</sup> Practice Time Preference (If desired)	Day of Week	Time Slot
First Choice		
Second Choice		
Third Choice		

**\*NEU Soccer will be using the soccer fields on Sat. mornings from 8-11am. Some limited baseball practice may be available during this time.**

**St. Ann Catholic Church  
Field Reservation Form**

**Fee**

Two practices per week for the season	\$100
One practice per week for the season	\$50

Please send your check made payable to St. Ann Catholic Church and submit with your completed application form to:

**Mike Orrick  
4508 W. 94<sup>th</sup> St.  
Shawnee Mission, KS 66207**

**No practice times will be assigned without a completed and signed reservation form and check for payment.**

**Responsibilities**

It is the coaches' responsibility to determine whether or not the fields are in safe condition for play and to ensure that no trash or items are left behind. Coaches will be advised if the fields are shut-down due to heavy rain or snow.

**Affidavit**

The below named Group or Organization shall indemnify and hold St. Ann Catholic Church and the Archdiocese of Kansas City in Kansas harmless from and against any loss, cost or damage of any nature arising out of any action or claim against St. Ann Catholic Church or the Archdiocese of Kansas City in Kansas, or its agents or employees, in connection with or related to any alleged injury or damage occurring on or around the St. Ann Catholic Church practice field immediately prior to, during or after the period for which the field is reserved by the Group or Organization.

\_\_\_\_\_  
Name of Group or Organization

\_\_\_\_\_  
Signature of Adult in Charge

\_\_\_\_\_  
Date