

**2008 Independent League Request Form
El Paso Parks and Recreation
Sports Division**



Independent League _____ Season: Fall Spring Summer Winter

Contact Name and Phone #: _____ Phone _____

Address _____ El Paso Texas 799_____

Email _____@_____

_____ Current Dated Rosters

_____ Current Insurance for Entire Season

_____ Anticipated Schedule

_____ Parent Class Date

_____ Proof of Coaches BG Check or BG Check Policy

_____ Copy of Rules and Regulations/Bylaws for Current Year

_____ Copy of Last Season Final Financial Statement

Entry Fee for Current Season _____per player or _____per team

Player Fee _____ Number of Players _____

Office Use ONLY

Receipt # _____ Amount _____ Date _____

Receipt # _____ Amount _____ Date _____

Receipt # _____ Amount _____ Date _____

players = _____ # of game slots on _____ # of fields

Permit issued _____ Date _____

Portajons needed: _____ Park _____ Payment _____ Receipt # _____

Portajons needed: _____ Park _____ Payment _____ Receipt # _____

Portajons needed: _____ Park _____ Payment _____ Receipt # _____

Holidays in Season: _____

Notes on league:
