

# **City of Lemoore**

# Kings Lions Complex/19<sup>th</sup> Ave

690 S 19th Avenue (@ HWY 198), Lemoore, CA 93245 (559) 924-6744 Option 2

Email: parksandrecreation@lemoore.com

#### **PLEASE NOTE:**

This form is a request to use the CMC Recreation in conjunction with the activity listed below. Final approval shall be granted by the Parks & Recreation Department upon receipt of the "Application" and in accordance with the attached Terms and Conditions as outlined in the CMC Rental Policy. **No Alcohol allowed at any child centered event.** 

## Section I: INDIVIDUAL/ORGANIZATION INFORMATION

A. Individual Use		
1. Name:		
2. Phone No:		
3. Address:	City:	Zip:
5. <b>Email:</b>		
6. <b>Resident</b> : Yes: No:		
B. For Organization or Group Use		
1 Name of Organization or Group:		
2. Organization/Group Address:		
3. Name of Responsible Person:		
Address:	Phone:	
Email:		
4. Non-Profit: Yes:, Non-Profit Number:	No:	
5. <b>Type of Group</b> : Resident: Non-Resident:	Service Club: Other:	
Section II: RESERVATION INFORMATI	ION (See below for pricing)	
A. Facilities Desired:  1. Softball Field:	4. Soccer Field with lights:	
2. Softball Field with Lights:	5. Entire Complex:	
3. Soccer Field:		

Re	Requested Date (s) and Time (s) of Use:					
A.	DATE(S):T	IME (S):				
	DATE(S):T	IME (S):				
	DATE(S):T	IME (S):				
В.	Type of Function (Meeting, dance, wedding reception, person of Please describe in full):					
c.	Estimated highest number in Attendance during the rer					
	Will any admission fee be charged? (Include dues, collewill Alcoholic Beverages be served? Yes: No:	cctions, donations, or other charges): Yes: No: Sold? Yes: No:				
PLI	ASE NOTE:					
the pro	State of California (in Fresno). State Law (AB13) prohibolists smoking within 20 feet of main entrance, exit and					
IT F	ental is Cancelled there will be a \$100 cancellation fee in	mposeaINI				
No	Rice/Glitter/ConfettiINT.					
FA	CILITY MUST BE LEFT AS YOU FOUND IT – NO FOOD, SPIL	LS, DEBRISINT.				
	submitting this application for use, I hereby certify that t derstand that any false information submitted may be gr	he information provided herein is true and correct, and further ounds for denial of this reservation.				
	Total:					
	Deposit Taken:	Date of Deposit:				
	Remaining Balance:	Due By:				
	SIGNATURE:	DATE:				

"In God We Trust"

Form Date: 2025

### Fee Breakdown

	Resident	Non-Resident	Non-Profit
Kings Lions Complex			
Entire Complex	\$800 / all day	\$880 / all day	\$560 / all day
Softball Field	\$40 / hour	\$50 / hour	\$28 / hour
Softball Field Lights	\$10 / hour	\$10 / hour	\$10 / hour
Soccer Field	\$40 / hour	\$50 / hour	\$28 / hour
Concession Stand	\$100 / all day	\$105 / all day	\$70 / all day
Deposit (Entire Park)	\$300	\$300	\$300