



# Hutto Parks and Recreation

## Baseball/Softball Facility Rental Application

500 West Live Oak Street, Hutto, TX 78634  
 Phone: 512-759-4000 • Email: [pard@huttotx.gov](mailto:pard@huttotx.gov)

Contact: \_\_\_\_\_ Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### EVENT INFORMATION

Event Name: \_\_\_\_\_ Facility Rules can be found [here](#).

Approximate Number of People: \_\_\_\_\_

Please provide a brief description and purpose of the event:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### FACILITY SPACE REQUESTED

- **Rental Dates: Thursdays Only, Starting February 4 until June 10 – 19 Weeks**
- **Fees: \$75 per slot without lights; \$100 per slot with lights**
- **Practices only**

Facility Request	Slot 1	Slot 2	Slot 3
Holmstrom Adult Field	<input type="checkbox"/> 5:00 – 6:30 pm	<input type="checkbox"/> 6:30 – 8:00 pm	<input type="checkbox"/> 8:00 – 9:30 pm
Mager Youth Baseball Field	<input type="checkbox"/> 5:00 – 6:30 pm	<input type="checkbox"/> 6:30 – 8:00 pm	<input type="checkbox"/> 8:00 – 9:30 pm
Mager Youth Softball Field	<input type="checkbox"/> 5:00 – 6:30 pm	<input type="checkbox"/> 6:30 – 8:00 pm	<input type="checkbox"/> 8:00 – 9:30 pm

### EVENT DETAILS

- Are bases needed for the event? Yes  No  If yes, what distance? \_\_\_\_\_ base \_\_\_\_\_ mound
- Is dragging needed for the event? Yes  No
- Will striping be needed for the event? Yes  No

By signing below, I certify the information I have provided on this application is true and accurate to the best of my knowledge. I understand the rental fees will be calculated based on the application information. I understand that any changes must be submitted in writing and approved by the Parks and Recreation Office. If I am a part of an organization, I will submit proof of insurance before the rental date. I understand the total rent must be paid in full prior to the use of the facility; or a deposit payment may be accepted with the approval from the Parks and Recreation Director. I agree to all the facility rules and will adhere to them knowing failure to do so can result in termination of the rental or loss of deposit.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\*Must download to desktop to submit

### Office Use Only

Application Status: Approved  Denied  Rental # \_\_\_\_\_ Keys: Yes No  
 Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_