



**APPLICATION FOR PERMIT  
LINDHOLM PARK BALL FIELD  
2020**

**Date:**

**Organization:**

**Contact Person:**

**Email:**

**Daytime Phone:**

**Emergency Phone:**

**Start date:**

**End date:**

<b>Requested Day(s) of week</b>	<b>Time</b>	<b>Field(s): East or West</b>

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**Signature of Applicant**

**Date**