City of Coquitlam



Tournament Event Checklist

Fields Allocation Office

500 Mariner Way, Coquitlam, BC, V3K 7B6 Fax form back to: 604.927.6301 Phone: 604.927.6295 Email: fieldrequests@coquitlam.ca

Contract #:

The purpose of this checklist is to provide Coquitlam Leisure & Park Services of your event's needs. All requests need to be approved by City staff and reflected on your event contract.

Instructions: If more information is required than a field allows for, please attach additional pages.

Section 1: Event &	Contact Information	1		
Organization Name:				
Event Name:				
Event Type: 🛛 Sports	Event/Tournament	□ Festival/Cultural Event	Private/Community Event Dother	
Expected attendance (in	ncluding players, coach	nes, parents/guardians):		
Contact person:				
Address:		City:	Postal Code:	
Home Phone:	Work Phone	e: Cell: _	Fax:	
Email:				

Section 2: Event Requirements – Booking Details

Date of Event Start Date: End Date:

No.	Field/ Space i.e. Percy Perry Stadium	Date	Time i.e. 14:00 hrs – 21:00 hrs
1			-
2			-
3			-
4			-
5			-

Notes:

Set Time: Will you require set-up time?	Yes 🗖	No 🗖
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No.	Field/ Space i.e. Percy Perry Stadium	Date	Time i.e. 14:00 hrs – 21:00 hrs
1			-
2			-
Notes			

Section 2: Event Requirements – Booking Details (continued)

Take Down: Will you require take-down time? Yes 🔲 No 🗌

No.	Field/ Space i.e. Percy Perry Stadium	Date	Time i.e. 14:00 hrs – 21:00 hrs
1			-
2			-

Notes:

Section 2: Event Requirements – Facility Details (See Town Centre Park Map)							
		on pricing)	<i>admissi</i>	s, specify	🗆 (lf, ye:	5 🗌 No	Admission ? Yes
Other \$	Event Pass \$		ass \$	_ Day Pa			Single Ticket \$ _
						lium	Percy Perry Stad
Scoreboard	Sound System	🗖 Media bootł		ndstand	🗖 Grai	F	Artificial Turf
	ea (Javelin, Discus, Hammer)	🗖 Throwing Ar	ge	: Put Cag	🗖 Shot		🗖 Jumping Pit
] No 🗆	:k? Yes 🗌	Closed trac	Track Oval - 🤉
							Notes:
							Tournament Site
J Plaza Area		•					
				-			
							Notes
Jorth 🔲 Mosquito	Baseball Diamonds: 🗖 South	□ South] North	ields: 🗖			Other Fields & A
							Notes:
	□ Other (Specify):	□ Officials	□ 4	□ 3	□ 2		Field House Ame Change Rooms:
							C
	□ North/West e field house-outside) □ East (east side □ Basketball Court □ Ska	West (west sid	/ground	☐ Sout ☐ Play	th Node ay Park	🗆 Spra	Common Areas Main Gates: Plaza Areas: Park Amenities:
] Scoreboard] Plaza Area North □ Mosquito	☐ Sound System ea (Javelin, Discus, Hammer) rf ☐ Media Tower Baseball Diamonds: ☐ South ☐ Other (Specify): ☐ North/West e field house-outside) ☐ East (east side	 Media booth Throwing An Warm Up Tu Score clock South Officials South West (west side) 	ge m North 4 st th Node /ground	ields: a Wess a Wess a Sout b Cont a Sout a Sout b Cont b Cont b Cont b Cont c C Cont c Cont	Gran Shot Shot Shot Wes Wes Sout Sout Sout 25 Grass F	lium f closed trac e e Amenities rf enities 1 Nort Nort Spra	Percy Perry Stad

Section 2: Event Requirements – Equipment Details

Please check "City" if you are requesting the equipment from the City of Coquitlam. All requests are subject to availability.

Event Equipment	No.#	City	Sports Fields	No.#	City
□ Tables			Corner Flags (Limited availability)		
Chairs			□ FLD LAX Nets (Only 6 available)		
Dollies			□ FLD HKY Nets (Only 6 available)		
□ Tents** Refer to Temporary Structures		N/A	□ Soccer Nets: □ Full size □ Super 8		
Additional Waste Bins			□ Uprights		

Section 2: Event Requirements – Equipment Details (Continued)

Fencing: (Provide Details below)	City 🗖		
Other #1: (Provide Details below)	No.#	_City 🗖	
Other #2: (Provide Details below)	No.#	_City 🗖	

Section 3: Permits, Licensin	g and Insurance	
Event Insurance		
Name of Insurance Carrier:		
Address:	City:	Postal Code:
Phone:	Cell:	Fax:
Email:		
Please provide the City of Coquitlam	with copies of all permits and insurances. Fa	x to: 604.927.6510 Attention: Field Area Coordinator
Liquor Served? Yes ☐ No ☐ If "YES" please specify types:	If, yes, has the organization obtained	a permit? Yes 🔲 No 🗖
Food Served? Yes I No I If "YES" please specify types:	If, yes, has the organization obtained	a permit? Yes 🗖 No 🗖 (See Section 6)
Gaming (<i>raffle</i>)? Yes □ No □ If "YES" please specify types:	If, yes, has the organization obtained a	a permit? Yes 🗆 No 🗖
Temporary Structures? (i.e. tents, b If "YES" please specify types:	oouncing castles, etc) Yes 🗖 No 🗍 🔹 * Is a	permit required?Yes 🗖 No 🗖
Signage? (i.e. Banners, Sandwich board If "YES" please specify types:	ls, etc) Yes 🔲 No 🗖	

Section 4: Food Services

Request to ope	en the park's concessior	i stand? Yes 🗌 No 🔲 If no, pl	ease list any food that is being served:
If food service	is being provided by an	outside company, please list ea	ch vendor and the appropriate information.
Vendor #1			
Name of Vend	or:		Contractor 🛛 Volunteer
Contact Name	:		Email:
Address:		City:	Postal Code:
Phone:		Cell:	Fax:
Vendor #2			
Name of Vend	or:		Contractor 🛛 Volunteer
Contact Name	:		Email:
Address:		City:	Postal Code:
Phone:		Cell:	Fax:
Vendor#3			
Name of Vende	or:		Contractor 🛛 Volunteer
Contact Name	:		Email:
Address:		City:	Postal Code:
Phone:		Cell:	Fax:
Do you need to	o hook up to potable wa	iter?Yes 🔲 No 🗌	
Power source:	□ Electrical □Na	atural Gas 🛛 Propane Gas 🗖	Gas Generators *NOT ALLOWED ON TURF FIELDS
	Other:		
Section 5: S	ecurity		
Will an externa	al security company be	used for your event? Yes 🔲 No	□ If 'Yes', please provide information.
Name of Secur	ity Company:		Number of Guards:
Contact Name	:		Email:
Address:		City:	Postal Code:
Phone:		Cell:	Fax:

Section 5: Security (Continued)

Please specify times the security company will be on-site. Note: This section is regarding the security company only.

Areas Monitored

No.	Field/ Space i.e. Percy Perry Stadium	Date	Time i.e. 14:00 hrs – 21:00 hrs
1			-
2			-
Notes			·

Will there be security during set-up? Yes □ No □

Will there be security during Take Down? Yes □ No □

1 -	nrs – 21:00 hrs
2 -	

Notes:

Overnight Security: Yes No Provide cell#: (If possible)

No.	Field/ Space i.e. Percy Perry Stadium	Date	Time i.e. 14:00 hrs – 21:00 hrs
1			-
2			-
Notes	:		

Section 6: Recycling and Waste

Waste/Garbage Removal: 🛛 Event Organizers	City (Additional charges may apply.)
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Recycling: Will use on-site recycling bins Yes

If no, organizers are responsible for bins, sorting & removal. Please provide details.

Additional Comments/Notes

The personal information collected on this form is collected in accordance with the *Freedom of Information and Protection of Privacy Act*. The City has authority to collect your information for the purposes of administering the Tournament Event Checklist. Should you have any questions or concerns about the collection of your personal information please call Kevin Powell, Parks Recreation and Culture, at 604-927-6295. For more information, go to www.coquitlam.ca

Have You Completed Everything?

Please ensure you have provided all of the necessary information in the required sections.

Section 1 - Completed Contact and Event Information provided

Section 2 – Event Requirements

- □ Booking Details: Event Dates, Set Up/Take Down
- Send Event/Tournament schedule to City (min. 10 business days before event) Date:
- Event site plan
- Facility Details: Identified facilities/Amenities required
- Equipment Details: Identified all equipment requirements

Section 3 – Permits, Licensing and Insurance

- □ Faxed copies of all permits/licensing/ insurance to City @ (604) 927.6510
- Business License(s)
- □ Insurance Certificate
- Liquor License
- Temporary Structures License (over 1200 sq ft)
- □ Gaming License
- Section 4 Food Services City Concession, Vendor Information ☐ Food Service Permit(s)
- Section 5 Security Security information provided. Dates, contact and coverage
- Section 6 Waste/ Recycling

Additional Items

- □ Special request needs
- Emergency/First Aid plan & requirements

Name

Date

Signature

Town Centre Park Map

