



Knox County Sportspark Facility/Tournament Request Application
Managed by: Metro Concessions Knoxville

Facility or Tournament Date(s) _____ (Only one service request per application)
(Circle one)

Name _____ Organization _____

Address _____

City _____ State _____ Zip Code _____

Phone (daytime) _____ Phone (evening) _____

Fax Number _____ Email Address _____

Daily Game Start Times _____ Number of Teams _____

Tournament Classification _____

State/National Championship _____ Yes _____ No

Association/Affiliation _____

SOFTBALL Youth _____ Adult _____ BASEBALL 14-U _____ 12-U _____ 10-U _____ 8-U _____

Slow Pitch _____ Fast Pitch _____

SERVICE REQUESTED

Number of fields requested 1 _____ 2 _____ 3 _____ 4 _____ 5 _____

Football 1 _____ 2 _____ 3 _____

Admission (gate) _____ Yes _____ No (If yes, what will be the cost?) Adult _____

Youth _____

Tournament Pass _____

Souvenir Sales _____ Yes _____ No Meeting Room Needed? _____ Yes _____ No

How many vendors/type? _____

Date request received _____ (for office use only)

METRO CONCESSIONS KNOXVILLE

Attn: Allen Lambert

349 SEVEN OAKS TRAIL

KNOXVILLE, TENNESSEE 37922

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FAX: 865-470-0129

Date request received _____ For office use only
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