



5249 Crestmore Road Jurupa Valley, CA 92509
 rjusportspark@rivcoparks.org
 951-683-3492
 www.ranchojurupasportspark.com



Riverside County Regional Park and Open Space District

ORGANIZATION PROFILE FOR FIELD USE 2012

For Non-Profit and Community Organizations

(To Establish Non-Profit Status – Please complete **BOTH PAGES** of form)

A.
 Name of Organization: _____
 Organization President: _____
 President's Address: _____
 President's Phone #: _____ Fax #: _____ Email: _____

President Affirmation: I the undersigned understand that no individual, group, or business is allowed to receive monetary gain from the use of Riverside County facilities without written permission from RivCoParks. I affirm that the information I provided is correct.

President's Signature: _____ Date: _____
 Organization's Headquarters Address (if different from president's address): _____

Organization's Main Phone #: _____ Fax #: _____
 Website address: _____

Mailing Address for Correspondence; check all that apply:
 President's Address Designated Representative's Address Organization's Headquarters Address

B.
 Board of Directors: YES NO If so, meetings are held: _____
 (Dates and Location)

Are meetings open to the public? YES NO
 Are meetings open to paid membership only? YES NO
 Membership Fee: YES NO Amount Charged: _____
 Charged per family: YES NO Charged per participant: YES NO

Estimated number of participants in **2012 Season** using Riverside County Outdoor Facilities: (March 2012 – November 2012)
 Youth: _____ Adults: _____
 Sports League Affiliations: _____



C. Umpire/Referee Organizations used: _____

Does the organization have the following?

- Group/organization rules & regulations
- Group/organization bylaws
- Group/organization written code of conduct
- Group/organization emergency communication plan
- Group/organization policy delineating established progressive disciplinary procedures for addressing behavioral problems of athletes, coaches, officials and spectators

Complete if applicable:

IRS Employer Identification #: _____

Non-Profit Status: (501-C03); (501-____ - ____); Other: _____

Non-Profit ID #: _____

Verification by Organizational Board: We affirm that the above applicant is in good standing with our organization and the information provided is correct.

Officer #1 Signature & Title: _____ Date: _____

Officer #2 Signature & Title: _____ Date: _____

____ I am claiming non-profit status (**complete entire form, and submit**)

____ I am NOT claiming non-profit status (**complete All of Section A. on Page One, Plus ONLY the Shaded area on Page Two and submit**)

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Questions: Contact Parks at 951-683-3492

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2012 Designated Representative

As the President of _____, I designate the following person(s) to represent the organization for the purpose of contacting Riverside County Regional Park and Open Space District. The person(s) named below will be solely responsible for the designated sport they represent, and no other sport.

DATE: _____ SEASON: (Check all that apply) Spring/Summer Fall Winter

PRESIDENT: _____

PRESIDENT SIGNATURE: _____

Name:(printed) _____ Sport Represented: _____

Address: _____
(Street) (City/Town) (Zip Code)

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Please CIRCLE the preferred phone contact number to be used during business hours (7:30 am – 4:00 pm)

Contact person (official representative) will be limited to the president

- Exception: the president of an organization may designate one person as the **sole contact per sport.**
- The president is allocating responsibility to the Designated Representative to conduct **ALL** field responsibilities for the assigned sport between RivCoParks and the organization.
 - o Only the president OR designated representative may request fields for that organization.
- Applications will NOT be accepted unless signed by either the president OR the assigned designated representative.
 - o RivCoParks will accept only **one contact per sport per organization.** Contact from organization members who are not the president or designated representative will be referred to the organization president.
 - o Official representative must be at least eighteen (18) years of age.

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