

## CITY OF WHITEWATER

### ARMORY GYM – OPEN GYM USE APPLICATION

(For Requests to Operate Open Gym as Defined by City Policy)

Use this form to request approval to operate Open Gym at the Armory Gym.

Only the Parks & Recreation Department may authorize Open Gym sessions. All requests must comply with the City's Facility Rental & Reservation Policy and the Open Gym Policy.

**Submit completed applications to:**

Jennifer Jackson

JJackson@whitewater-wi.gov

Whitewater Municipal Building

| Applicant Information                        |                                        |
|----------------------------------------------|----------------------------------------|
| Applicant Name (Person Responsible on site): | Jose M. Villegas                       |
| Organization/ Group (if Applicable):         | Community Pick-up Soccer               |
| Mailing Address:                             | 830 E North St<br>Whitewater, WI 53190 |
| Phone Number (Cell):                         | (920) 397-1027                         |
| Email Address:                               | Manny.villegas18@gmail.com             |

| Open Gym Request Details                                                                                                                                                                                                                                                 |                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| Requested Start Date: <u>10-28</u>                                                                                                                                                                                                                                       | Requested End Date: <u>5-30</u> |
| Days of Week (check all that apply):<br><input type="checkbox"/> Mon <input type="checkbox"/> Tue <input checked="" type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input checked="" type="checkbox"/> Sun |                                 |
| Sunday<br>Start Time: <u>3pm</u> End Time: <u>7pm</u>                                                                                                                                                                                                                    | Wednesday<br><u>5pm - 9pm</u>   |
| Frequency:<br><input type="checkbox"/> One-time session<br><input checked="" type="checkbox"/> Weekly recurring<br><input type="checkbox"/> Other (explain): _____                                                                                                       |                                 |

| Open Gym Purpose & Activity Description                                                                                                                           |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Open Gym is unstructured, drop-in, public recreation time. It cannot include private lessons, team practices, exclusive groups, or paid instruction.              |
| Name of Open Gym (for calendars/marketing):<br><u>Community Pick up Soccer</u>                                                                                    |
| Describe exactly what activities will occur during Open Gym<br>(e.g., free play basketball, drop-in volleyball, general recreation):<br><br><u>Pick up Soccer</u> |
| Court Use: <input checked="" type="checkbox"/> Full Court <input type="checkbox"/> Half Court <input type="checkbox"/> Other: _____                               |

### Age Group & Public Access (Required)

Primary age group(s) this Open Gym will serve (check all that apply):

- ☐ Grades K-5  
☐ Middle School  
☒ High School  
☒ Adults (18+)  
☒ Older Adults (55+)  
☐ All Ages / Family  
☐ Other: \_\_\_\_\_

Will this Open Gym be fully open to the public within the age group(s) listed above?

- ☒ Yes (required for Open Gym approval)  
☐ No (not eligible for Open Gym)

Will any fee be charged to participants?

- ☒ No (required for Open Gym approval)  
☐ Yes - Amount: \$ \_\_\_\_\_ (not eligible for Open Gym)

### Expected Participation & Supervision

Expected number of participants per session:

Minimum: 12 Maximum: ~40

Number of supervising adults on site: 1

On-site supervisor name (if different from applicant):

José Villagás

On-site supervisor cell number:

Same as personnel

## Required Open Gym Compliance Information

### Waiver Requirement

All participants must complete a City-approved waiver before participating.

### Who will collect and submit waivers?

on-site Supervisor (myself)

### Supervision & Safety Plan

Describe how you will monitor participants, address behavior, and ensure safe, inclusive use of the gym:

Soccer Community knows each other well where there won't be any issues. If so, I'll speak to them, give a warning. If they continue the bad behavior, then kick them out.

### Cleaning & Facility Care Plan

(Open Gym groups must sweep floors, remove trash, return equipment, and report damages after every session.)

Describe how you will complete required cleaning:

I'll have the last participants help clean skid marks and trash.

## Equipment & Facility Needs

### Equipment you will bring:

Goal nets, pinnies, soccerball

### Equipment requested from the City (if available):

N/A

**Additional set-up needs:**

N/A

**OPEN GYM POLICY ACKNOWLEDGEMENT**

By submitting this application, I acknowledge that:

1. I have read and will comply with the City of Whitewater Facility Rental & Reservation Policy and Open Gym Policy.
2. Open Gym must be open to the public, free of charge, and not used for private, invitational, team, or paid activities.
3. I will ensure all participants complete required waivers.
4. I am responsible for supervision, behavior management, and safety.
5. I must clean the gym after every session and report damages immediately.
6. Misrepresentation of Open Gym may result in reclassification, fees, loss of reservation privileges, and/or suspension.
7. The Parks & Recreation Department has full authority to approve, modify, deny, or discontinue Open Gym at any time.

**Applicant Signature:**



**Date:** 9/18/26

**FOR OFFICE USE ONLY**

**Application received by:**

\_\_\_\_\_ Date: \_\_\_\_\_

**Open Gym Eligibility Check:**

- ☐ Open to public
- ☐ No fee charged
- ☐ Drop-in only
- ☐ No private/team/invite-only activities
- ☐ Waiver process approved
- ☐ Supervision plan approved

**Staff Determination:**

- ☐ Approved – Open Gym
- ☐ Denied (reason): \_\_\_\_\_
- ☐ Reclassify as Rental (Group 3 or 4)

**Approved Dates/Times:**

\_\_\_\_\_

**Conditions/Notes:**

\_\_\_\_\_

\_\_\_\_\_

**Approving Staff Signature:**

\_\_\_\_\_

**Date/Time:** \_\_\_\_\_