

EVENT PERMIT



Ordinance 17-08

ITS YOUTH FOOTBALL AND CHEER- SPRING/SUMMER PRAC

PERMIT NUMBER: TMP2019-00258

Date(s) of Event: AUGUST 31, 2019 UNTIL DECEMBER 31, 2019

8:00AM UNTIL 9:00PM

Property Owner:

LEE COUNTY

Applicant:

WILLIAM SCHELL

954-562-3638

Description:

YOUTH FOOTBALL GAMES- 5 GAMES PER DAY

Location of event: 6490 SOUTH POINTE BLVD, FORT MYERS, FL 33919

RUTENBERG PARK

Will the event be attended by 1000 or more people? Yes

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event? No

Will a bond be posted for this event? No

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners .∉e ¢tountv. Flor/da

ftmpprmt_specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

TMP2019-00258

CYPRESS LAKE HORNETS YOUTH FOOTBALL AND CHEER - SPRING/SUMMER PRACTICES AND HOME GAMES



Event Application

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

FILM PERMIT

Title of Event / Name of Production	Cypress Lake Hornets Youth Football and Cheer - Spring/Summer Practices & Homes Games			
Date(s) of Event / Production:	Practices from 8/31/19 - 12/31/19; Home Games - 8/31/19, 9/14/19, 9/28/19, 10/19/19, 10/26/19, 11/9/19, 11/16/19 & 11/23/19			
Location(s) of Event:	Rutenberg Park - Football Fields			
Name of Applicant:	William Schell			
Applicant Address:	6500 South Pointe Drive, Fort Myers, FL 33919			
Applicant Phone Number:	954.562.3638			
Contact Person: (If different from applicant)				
Contact Phone Number: (If different from applicant)				
Email Address:	gator3104@gmail.com			
Estimated Attendance:	1000 - through date per game day			
Event Description: Include each activity, when activities take place, etc.	Youth Football Games - 5 games per day			
Hours of Operation:	8:00 a.m 9:00 p.m.			
STRAP # of Parcel:	21-45-24-00-00013.0080			
Owner of Premises*:	21-45-24-00-00013.0080 LEE COUNTY			

^{*}Notarized statement from the property owner specifically consenting to the proposed use required.



Fill out the following questions for allpermit types:

What is the Zoning Classification of th	e premises? County Park & Recreation		
Are any temporary structures to be ins	stalled for the event? Yes No	Type:	
Do you have the appropriate permits f	or the temporary structures?	Yes No	
* For a 'Special Event' and 'Use of Cou indentified, including all parking areas	inty Property' permit, submit a site plan w	th all proposed facilities and activities	
Insurance Company Insuring the Even	t: ESP Insurance Brokerage LLC		
Note: Certificate of Insurance must be submitted	ted at time of application		
Surety Company Bonding this Event (N	Name and Address):		
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?	
├ Yes	⋉ Yes	⊤Yes ⊼ No	
If yes, automobile coverage must be included on the certificate of insurance. If yes, products liability coverage must be included on the certificate of insurance. If yes, products liability coverage must be included on the certificate of insurance.			
Name & Address of Organization Providing Food:	ypress Lake Hornets - same address as above		
Type of Food being Served: hot dogs, I	namburgers, nachos, water, soda		
Section II - USE OF COUNTY F	PROPERTY PERMIT		
Organization Sponsoring the Event: Cy	ypress Lake Hornets		
Fill out this portion for applications fo	or Solicitation in the County Rights-of-Way	<i>y</i> :	
Name of Charity:			
Address of Charity:			
Phone Number:			
Non-profit certificate/registration nur	nber:		
(Proof of registration with the Dept. of Agriculture &	Consumer Services §496.405 or proof the organization i	s exempt from this requirement. §316.2045)	
Section III - SALE/CONSUMPT	TION OF ALCHOLIC BEVERAGES P	ERMIT	
Is alcohol being sold/consumed on Coulf Yes, then a "Lee County Alcohol Permit" is required	unty Property? I. Only non-profit organizations can sell alcohol on County	├─ Yes No Property.	
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	nber:		

Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

Гуре of Production (choose all tha	at apply):		
TV Movie or Special	TV Series / Pilot	Γ	TV Commercial Still Photos
Public Service Announcement	☐ Industrial / Documentary	Γ	Other:
Will any of the following be neede	ed or included*?		
Street Closure			┌─ Yes ┌─ No
Traffic / Crowd Con	trol		☐ Yes ☐ No
Fire or Burning			☐ Yes ☐ No
Explosives or Pyrote	echnics		☐ Yes ☐ No
Animals, Large or Sr	mall		☐ Yes ☐ No
Construction of Any	[,] Kind		☐ Yes ☐ No
Large and/or Nume	rous Vehicles		☐ Yes ☐ No
Helicopters, Boats,	etc.		☐ Yes ☐ No
Stunts			┌ Yes ┌ No
Other			┌─ Yes ┌─ No
Special Dayling Deguirements			
Special Parking Requirements:		***************************************	
City or County Services Required	d: (Personnel, equipment, facili	ties, et	etc.)
			,
			production in Florida to track the economic imp
the industry. If exact figures are	not available, please estimate	as clos	osely as possible.
Number in Cast:	Number in Crew:		Number of locals hired:
Total budget:	Estimate amount sp	ent in L	Lee County:
Hotel room nights:	Number of shooting	davs:	:
number of rooms x		, -	P*************************************

Applicant Agreement - Signature Required



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

Applicant Agreement - Signature Required



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

WILL SUU	
Signature of Applicant	Witness
William Schall President	
Print Name of Applicant and Title	Print Name of Witness
8/23/19	
Date	Date



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

Cneck the approprie	ite box(es) bei	JW:
* *	JNTY PROPERTY	
FILM PERM		IME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PI	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Parking:	Parking to be har be hired to contai	ndled by event staff. If a large crowd is anticipated, additional deputies should n and limit any parking issues.
Deputies (How Many?):	8/31/19, 9/14/19, two deputies per of the schedule that	9/28/19, 10/19/19, 10/26/19, 11/9/19, 11/16/19 & 11/23/19 - game. This permit and the detail request form have been filled out according to was turned over by the league.
Fee for Services:	There is a 4 hour The hourly rate fo	minimum per deputy on all details. Security details are \$48/hr per deputy. r a supervisor, should one be deemed necessary is \$58/hr.
Special Arrangements:	game. If the deta cancellation of the	ed to be paid for in advance no less than one week prior to the start of each ails are not paid in advance, Lee County Parks & Rec will be notified and not event may be the result. LCSO is not responsible for seeking out payments. Sponsible for confirming game dates and times prior to the start of the event coverage. Anything over the 4 hour mimimum security rate will be billed out surity rate.
	Print Namo	
	Print Name: Signature:	Captain J. Loethen Capt Louthur 92149
	Title:	Special Events, Permits and Details
	Date:	8/20/19



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

Check the appropr	riate box(es) below:
SPECIAL E	VENT PERMIT
☑ USE OF CO	OUNTY PROPERTY PERMIT
FILM PERI	MIT
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	None necessary.
Fee for Services:	Not applicable
Flammable Vegetation:	Not applicable
First Aid Equipment:	None necessary AS NEEDED
Fire Extinguishing:	None necessary As Parried
Special Arrangements:	None necessary CULL 911
	Print Name: Avio Hogado Signature: Avio Hogado Title: Avio Avio Hogado
	Title: FIRE CHIEF

Date:



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 14752 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912 (239) 533-3911

Check the appropri	ate box(es) belo	w:
SPECIAL EV	/ENT PERMIT	
⋉ USE OF CC	UNTY PROPERTY F	PERMIT
FILM PERM	11T	
		EASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION Y WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	No additional preca	utions necessary.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To arrange special event coverage, contact our office at
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins Discrebuglis Discrebuglis B. Higgins Discrebuglis Discrebuglis Discrebuglis Discrebuglis Discrebuglis Discrebuglis Discrebuglis Discrebuglis Discrebuglis Dis
	Title:	Division Chief
	Date:	August 20, 2019



DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION

Check the appropriate box(es) below:

▼ SPECIAL EVENT PERMIT

FILM PERMIT

□ USE OF COUNTY PROPERTY PERMIT

WILL REQUIRE THE APP	LICANT TO COM	PLY WITH FOR THEIR E	VENT.	
Parking:	Park in designated	d areas. No event parking o	on Lee County maintained road I	rights-of-way.
Ingress and Egress:	Use of all establish	ned means of ingress and e	egress	
Special Arrangements:	Use Lee County Sh	neriff's Office for assistance	with traffic control for major eve	ents, as needed.
	Print Name:	Bryan Miller		-
	Signature:	Bryan D. Miller	Digitally signed by Bryan D. Miller Date: 2019.08.21 12:47:28 -04'00'	-
	Title:	Senior Project Manager		-
	Date:	August 21, 2019		-



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Check the	appropriate	box(es) below:
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▼ SPECIAL EVENT PERMIT

·			ERAGES WITHIN LEE COUNT	Y FACILITIES
AFTER REVIEWING THI WILL REQUIRE THE APF			OW WHAT ARRANGEMENTS EVENT.	S YOUR ORGANIZATION
Illumination:	Must follow all loc	cal codes and ordinances t	o shut ball field lights off by desig	nated time.
Parking Areas:		nust develop a parking pla ain open and clear for em	n with parking attendants to ensuergency vehicles.	ire all emergency access
Special Arrangements:	officials and fans. building codes, Pa outside vendors a	Follow established guidel orks and Recreation Ordina re approved as mobile ver	aff to ensure crowd control and sa ines set by the Lee County Sheriff ince (18-12) as per life safety and f ndor through Lee County Parks an s. Notify site supervisor of any pro	's Office. Must follow all ire codes. Ensure any d Recreation. Ensure all
	Print Name:	Alise Flanjack		
	Signature:	Alise Flanjack	Digitally signed by Alise Flanjack Date: 2019.08.21 17:20:43 -04'00'	
	Title:	Deputy Director		
	Date:	August 21, 2019		



LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

	NT PERMIT			
⋉ USE OF COU	NTY PROPERTY PERMIT			
PERMIT TO S	ELL AND CONS	SUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES		
FILM PERMI	Γ			
,				
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.		
nsurance Requirements:	occurrence to pr	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.		
Special Arrangements:				
	Print Name: Signature:	Mike Figueroa Mike Jajin —		
	Title:	Risk Program Manager		
	Date:	August 20, 2019		

CYPRLAKE

$ACORD_{m}$

CERTIFICATE OF LIABILITY INSURANCE

Client#: 52292

DATE (MM/DD/YYYY) 06/26/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

CONTACT Chris Price	
PHONE (A/C, No, Ext): 6173985557 FAX (A/C, No):	
INSURER(S) AFFORDING COVERAGE	NAIC#
INSURER A : Houston Casualty Company	42374
INSURER B : AIG Insurance	19402
INSURER C : Great American Ins Co. (IL)	
INSURER D:	
INSURER E:	
INSURER F:	
REVISION NUMBER:	
	PHONE (A/C, No, Ext): 6173985557 E-MAIL (A/C, No, Ext): 6173985557 E-MAIL (A/C, No): (

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR LIMITS TYPE OF INSURANCE POLICY NUMBER X COMMERCIAL GENERAL LIABILITY 07/01/2019 07/01/2020 EACH OCCURRENCE Α Χ 197008660 \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 X OCCUR CLAIMS-MADE MED EXP (Any one person) \$1,000,000 PERSONAL & ADV INJURY \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE PRO-\$1,000,000 PRODUCTS - COMP/OP AGG POLICY OTHER: COMBINED SINGLE LIMIT (Ea accident) **AUTOMOBILE LIABILITY** BODILY INJURY (Per person) ANY AUTO ALL OWNED SCHEDULED BODILY INJURY (Per accident) \$ **AUTOS** AUTOS PROPERTY DAMAGE NON-OWNED HIRED AUTOS (Per accident) \$ **UMBRELLA LIAB** EACH OCCURRENCE OCCUR **EXCESS LIAB** AGGREGATE CLAIMS-MADE \$ DED RETENTION \$ WORKERS COMPENSATION OTH PER STATUTE AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT N/A E.L. DISEASE - EA EMPLOYEE \$ (Mandatory in NH) If yes, describe under
DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT SRG0009133720 07/01/2019 07/01/2020 SEE REMARKS A&H В 07/01/2019 07/01/2020 SEE REMARKS EPPE191492 С D&O DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) THE CERTIFICATE HOLDER is added as an additional insured with respects to general liability coverage but only with respect to liability arising out of the operations of the named insureds league. Sexual Abuse / Molestation limits are as follows: \$1,000,000 EACH OCCURRENCE / \$1,000,000 AGGREGATE THIS POLICY DOES NOT EXCLUDE CONCUSSIONS OK 08/20/2019

(See Attached Descriptions)

CERTIFICATE HOLDER

LEE COUNTY BOARD OF COUNTY **COMMISSIONER** P.O. BOX 398 Fort Myers, FL 33902

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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DESCRIPTIONS (Continued from Page 1)

YOUTH PARTICIPANTS ACCIDENT & HEALTH COVERAGE

Accidental Death, Accidental Dismemberment (AD&D) Benefit: \$10,000 Maximum amount

Accident Medical Expense Benefit: \$250,000 \$250

Deductible:

per accident

Dental Maximum: \$250 per

tooth/per accident

Incurral Period: within 90 days of the date of the accident causing the Injury

Benefit Payout Period: payable only for such charges incurred within 52 weeks after the date of the

accident causing the Injury

7V7 ACCIDENT & HEALTH COVERAGE

Accidental Death, Accidental Dismemberment (AD&D) Benefit: \$5,000 Maximum amount

Accident Medical Expense Benefit: \$2,500 Deductible: \$250

per accident

Dental Maximum: \$250 per

tooth/per accident

Incurral Period: within 90 days of the date of the accident causing the Injury

Benefit Payout Period: payable only for such charges incurred within 52 weeks after the date of the

EQUIPMENT FLOATER - POLICY NUMBER 197008660 COMPANY: HCC

Amount of Insurance: \$55,000 Sports Equipment

Limit subject to a \$25,000 limit per item. Any item of property with a value of \$25,000 or more must be

scheduled separately Deductible: \$500

CRIME PROTECTION POLICY NUMBER 197008660 COMPANY: HCC

Crime / Employee Theft \$10.000 Deductible \$500

DIRECTORS & OFFICERS

Directors & Officers Limit \$1,000,000 Retention \$1,000 Aggregate Limit \$1,000,000

Date	Away	Home	Time	Site
Sat 8/24	Bye	Hornets		
	SHARKOSH.			
Sat 8/31	Chiefs	Hornets	TBD	Rutenberg Park
				6500 South Pointe Dr.
		100		
Sat 9/7	Hornets	Sharks	TBD	Bonita Springs Highschool
				25592 Imperial Pkwy
	FAR-ST			Bonita Springs, FL 33919
Sat 9/14	Hawks	Hornets	TBD	Rutenberg Park
				6500 South Pointe Dr.
				Fort Myers, FL 33919
	2744577(2)			Fort Myers, FE 33717
Sat 9/21	Hornets	Trojans	TBD	Loly Highschool
Sat 9/21	lionicis	Trojans	1100	Lely Highschool
		1		1 Lely Highschool Blvd
				Naples, FL 34113
Sat 9/28	Gators	Hornets	TBD	Rutenberg Park
			1	6500 South Pointe Dr.
				Fort Myers, FL 3391
Sat 10/5	Bye	Hornets		
Sat 10/12	Hornets	Hawks	TBD	Ida Baker
		124,1115	1.00	•
				3500 Aqualinda Blvd.
		İ	į	Cape Coral, FL 33914
Sat 10/19	Chiefs	Hornets	TBD	Rutenberg Park
				6500 South Pointe Dr.
			1	Fort Myers, FL 33919
				Fortingers, FL 33919
at 10/26	Sharks	Hornets	TBD	Rutenberg Park
	Siding	Homets	1100	1
				6500 South Pointe Dr.
				Fort Myers, FL 33919
-4 11 /0	LI own of-	Cata	/mpp	
at 11/2	Hornets	Gators	TBD	Fleischman Park
		1		1600 Fleischmann Blvd
				Naples, FL 34102
at 11/9	Titans	Hornets	TBD	Rutenberg Park
		1		6500 South Pointe Dr.
	,			Fort Myers, FL 33919
		4.		
it 11/16	Playoffs		TBD	TBD
it 11/23	Championship			TDD
11 11/4J	Crambionsinb			TBD