

## STUDENT RECREATION CENTER FACILITY REQUEST FORM

Today's Date: \_\_\_\_\_

### EVENT INFORMATION

Organization requesting space: \_\_\_\_\_

Purpose for event: \_\_\_\_\_

Participants (How Many)

Students \_\_\_\_\_ Faculty/Staff \_\_\_\_\_ Alumni \_\_\_\_\_

External Group \_\_\_\_\_ Other (specify) \_\_\_\_\_

Total Attending \_\_\_\_\_ Will an entry fee be charged? Y / N

If yes, how much? \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Department /Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Fax \_\_\_\_\_

### RESERVATION INFORMATION

Dates of Event	Days of the Week	Start Time	End Time	Space requested – Be specific # of courts, climbing wall, mtg. Rm, etc.

Remarks, special requests or equipment needs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### CONFIRMATION INFORMATION

Space Approved By \_\_\_\_\_ Notices to: Intramurals \_\_\_\_\_ CC to: User \_\_\_\_\_

Rental Fee \_\_\_\_\_ Outdoor Pursuits \_\_\_\_\_

Equipment Fee \_\_\_\_\_ Public Safety \_\_\_\_\_

**Return to:** Student Recreation Center, 2200 Bonforte Blvd, Pueblo, CO 81001 or Fax 719- 549- 2844.

For more information call Jack @ 719-549-2067.

