Practice Facility Request Form

|  |  |
| --- | --- |
| Club: |  |
| Representative: |  |
| Phone: |  |
| E-Mail: |  |
| Expected Attendance: |  |

**This request is for a regular practice/workout reservation for the club.**

Please list the facility choice in order of importance:

|  |  |  |  |
| --- | --- | --- | --- |
| **FACILITY:** |  | **ROOM:** |  |
| **FACILITY:** |  | **ROOM:** |  |
| **FACILITY:** |  | **ROOM:** |  |
| Please list practice day and time in order of importance: |
| **DAY:** |  | **TIME:** |  |
| **DAY:** |  | **TIME:** |  |
| **DAY:** |  | **TIME:** |  |
| **DAY:** |  | **TIME:** |  |
| **DAY:** |  | **TIME:** |  |

To request space for any game, match, or special event the club must submit a separate Event Facility Request Form.

Office Use ONLY:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date Submitted: |  | Staff Initials: |  | Approved: |  |