

Sport Clubs will complete this form by the date set forth by Campus Recreation and Wellness Administration. All sport club requests will be submitted for the succeeding semester with a deadline on or around the mid-point of the current semester. This allows the department to provide optimal space and time options for club activity.

Please indicate your choice of facilities, days, and times for the coming semester. Be as specific as possible. **Note:** *Clubs are restricted to one reservation during “peak hours” (3p-8p Monday-Thursday) and two reservations during “non-peak hours.” Your reservations from previous semesters have no impact on your future reservations...do not expect the same days and times from semester to semester. There is no guarantee that your club will receive your desired days and times and Campus Rec Admin reserves the right to change any reservation at any time for any reason.*

**Schedule request for semester:**

**Year:**

**Sport Club:**

**Person submitting Request:**

**Email:**

**Phone:**

**Preferences for club reservations related to recurring practice/meeting**

- |               |      |            |        |      |
|---------------|------|------------|--------|------|
| 1. Facility:  | Day: | Recurring: | Start: | End: |
| 2. Facility:  | Day: | Recurring: | Start: | End: |
| 3. Facility:  | Day: | Recurring: | Start: | End: |
| 4. Facility:  | Day: | Recurring: | Start: | End: |
| 5. Facility:  | Day: | Recurring: | Start: | End: |
| 6. Facility:  | Day: | Recurring: | Start: | End: |
| 7. Facility:  | Day: | Recurring: | Start: | End: |
| 8. Facility:  | Day: | Recurring: | Start: | End: |
| 9. Facility:  | Day: | Recurring: | Start: | End: |
| 10. Facility: | Day: | Recurring: | Start: | End: |

**Comments related to request (special equipment, access to storage, etc):**

**Preferences for club reservations related to hosting an event(s)**

- |              |       |             |           |
|--------------|-------|-------------|-----------|
| 1. Facility: | Date: | Time Start: | Time End: |
| 2. Facility: | Date: | Time Start: | Time End: |
| 3. Facility: | Date: | Time Start: | Time End: |
| 4. Facility: | Date: | Time Start: | Time End: |
| 5. Facility: | Date: | Time Start: | Time End: |
| 6. Facility: | Date: | Time Start: | Time End: |

**You will have to complete a Facility Reservation Request Form if approved to host on a specific date.  
Comments related to request (special equipment, access to storage, etc):**

**Would there be any non-RWC members attending your recurring practice(s)/meeting(s) on a constant basis;  
i.e. coaches:**

**If yes, please provide their names and positions with the club (NOTE: They are responsible for their own  
parking accommodations):**

**Campus Rec and Wellness Office Use Only**

Form received by:

Date Received:

Recurring practices approved:

Event(s) approved:

Comments from CRec Admin: