



TRINITY UNIVERSITY

Athletic Facility Request Form



- Organization Requesting Use _____
- Organization Contact Person _____
- Contact Person Telephone No. _____
- Email _____
- Mailing Address _____

Reason for Facility Use: _____

- Approximate Number of participants that will be in attendance : _____
- Will admission be charged YES NO
- Will concession services be need YES NO
- Date : _____
- Time: _____ am/pm to _____ am/pm
- What physical plant services will be needed: (Please note extra charges will be assessed for set up.)

Please Mark the facility you wish to

- | | | |
|-------------------------------|------------------------------|-----------------------------|
| Sam's Gymnasium _____ | Room 120 _____ | Softball Field _____ |
| Webster Gymnasium _____ | Multi Purpose Room _____ | Intramural Field _____ |
| Hixon Natatorium _____ | Racquetball Court _____ | Soccer Field _____ |
| Stumberg Fitness Center _____ | Squash Court _____ | Outdoor Pool _____ |
| Conference Room _____ | Varsity Tennis Court _____ | Meadows Pavilion _____ |
| Stieren Dance Studio _____ | Delavan Tennis Court _____ | Sand Volleyball Court _____ |
| Room 223 _____ | Pittman Tennis Court _____ | Outdoor B-ball Courts _____ |
| Room 224 _____ | Stevens Football Field _____ | |
| Room 125 _____ | Baseball Field _____ | |

Comment and Special Arrangements:

For Office Use Only:

Athletics
 Scheduling Conflict Yes No
 Physical Plant and/or Field Crew Date: _____ Security Date: _____
 Assistant Athletic Director _____ Recommended _____ Not Recommended
 Director of Athletics _____ Date _____

Public Relations Approve Request Deny Request
 Signature _____ Date _____

Contract
 Sent: _____
 Signed, Dated, and Returned: _____