

Request for Facility Use - SUMMER, 200_

To: Summer Coordinating & Scheduling Committee
 Attn: Sam Burney
 301 O.D. Smith Hall
 Auburn University, Alabama 36849

Please reserve campus facilities for use by the _____ program during the period _____, 200_. We expect to have _____ participants in our program. I understand facilities reserved will be available from 1 pm on first day of camp until 11 am on last day. The facilities needed are indicated below: Where specified under remarks, I will make reservation of facility directly with the facility manager and note the intended use on this form.

<u>Facility</u>	<u># Required</u> (if applicable)	<u>Date(s)</u>	<u>Time Needed</u> (if applicable)	<u>Remarks</u>
a. Hotel Rooms	___sgl___dbl	_____	_____	<u>Reserve directly</u>
b. Residence Hall Spaces	_____	_____	_____	_____
c. Terrell Dining Hall	_____meals/day	1 st Meal: B__L__D__	Last Meal: B__L__D__	_____
d. War Eagle Food Court	_____meals/day	1 st Meal: B__L__D__	Last Meal: B__L__D__	_____
e. AU Dixon Conf Center	_____mtg rms	_____	_____	<u>Reserve directly</u>
f. Foy Student Union	_____mtg rms	_____	_____	<u>Reserve directly</u>
g. Foy Student Union Ballroom	_____	_____	_____	_____
h. Burton Hall Registration Area	_____	_____	_____	_____
i. Coliseum Floor	_____	_____	_____	_____
j. Student Act Ctr-Arena	_____	_____	_____	_____
k. Student Act Ctr-Overhang	_____	_____	_____	_____
l. Student Act Ctr-Pavilion	_____	_____	_____	_____
m. Auxiliary Gym	_____	_____	_____	<u>Reserve directly</u>
n. Football Practice Field	_____	_____	_____	<u>Reserve directly</u>
o. Intramural Fields	_____	_____	_____	<u>Reserve directly</u>
p. Rec Tennis Courts	_____	_____	_____	_____
q. Plainsman Park	_____	_____	_____	<u>Reserve directly</u>
r. Swimming Pool	_____	_____	_____	_____
s. Soccer Field	_____	_____	_____	<u>Reserve directly</u>
t. Track	_____	_____	_____	<u>Reserve directly</u>
u. Varsity Tennis Courts	_____	_____	_____	<u>Reserve directly</u>
v. Arboretum	_____	_____	_____	_____
w. Graves Amphitheater	_____	_____	_____	_____
x. Jordan Hare Stadium	_____	_____	_____	<u>Reserve directly</u>
y. Langdon Hall	_____	_____	_____	_____

I understand I will be provided information concerning this request after November 15th. If my request is confirmed, I will provide regular feedback to the Summer Coordinating & Scheduling Committee in accordance with instructions to be included in my confirmation notice. The Campus Sponsor for this program is: _____ and a signed Certificate of Sponsorship for this camp is attached .

Signed: _____
 Name: _____
 Title: _____
 Phone: _____ Email: _____
 Billing Address: _____
 (or AU Acct #) _____

SUBMISSION DEADLINE: September 30 prior to Camp Season [Submit a separate form for each camp]