



FACILITY RENTAL REQUEST

Organization Name: _____ Size: _____

Organization Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Title: _____

Contact Number(s): _____

Contact Email: _____

Nature of Event: _____

Date(s) & Time(s) Requested: _____
(Please Allow Time for Setup and Cleanup)

Additional Information: _____

Facility Requested: Any Blue Gym Grey Gym White Gym Dance Studio

Blue Gym - Competition Size Spring Floor.

Grey Gym - Competition Size Non-Spring Floor.

White Gym - Spring Floor (not competition size) with Tumbling Trampoline and Rod Floor.

Dance Studio - Wooden Dance Floor with Mirrored Wall

Renter understands the Reservation Deposit is required to hold a reservation and the Security Deposit is due prior to rental. The Reservation Deposit is non refundable if the rental is cancelled, but will be applied to the Rental Fee. Renter also understands the Facility Rental Terms & Conditions must be signed prior to the rental.

Contact Signature: _____

Printed Name: _____ Date: _____

For Showtime Use:

Reservation Deposit: _____ Rental Fee: _____ Security Deposit: _____