RecPlex Use Request

Section A: General Information

Name of Organization/League/Team: _____

Season Requesting: ☐ Fall/Winter (September – April/May)
☐ Spring/Summer (May-September)

Purpose of Request: ☐ Single Event ☐ Reoccurring Day and Time

Type of Space Requesting: ☐ Program Room ☐ Ice Sheet ☐ Large event space

User Type: ☐ Local Sport Organization/Youth Physical Activity Group
☐ Community Partner offering recreation or health Initiatives
☐ Public Event or Cultural Gathering
☐ Private Non-recreational event

Returning User? ☐ Yes
☐ No

Section B: Contacts

Main Contact information

(Who will be responsible for making and managing bookings and onsite programming)

Name: _____ Phone Number_____

Email Address: _____

Billing/Treasurer Information:

(Who do we send invoices and fees to)

Name: _____ Phone Number: _____

Email Address: _____

Public Information/Inquiry:

(Who do we refer people to when inquiring about your organization/program)

☐ Website/Facebook page: _____

☐ Email: _____

☐ Phone Number: _____

All information must be filled out for us to consider your request for booking. If sections are left blank we will disregard the request until all relevant information has been provided.

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Section C: Recurring Bookings

Reoccurring Requests: Start date _____ End date _____

Days:	Times:		
☐ Sunday	_____	_____	_____
☐ Monday	_____	_____	_____
☐ Tuesday	_____	_____	_____
☐ Wednesday	_____	_____	_____
☐ Thursday	_____	_____	_____
☐ Friday	_____	_____	_____
☐ Saturday	_____	_____	_____

Section D: Single Bookings

Date of event: _____ Start and End time of Event: _____

Expected Number of Attendees: _____

Requesting Other Equipment:

☐ Tables - Quantity? _____ ☐ Chairs - Quantity? _____ ☐ Pipe and Drape?

☐ Stage – Large _____ Small _____ ☐ Sound System

Seasonal Allocation Timeline:

Fall/Winter Season – July 1 – Sept. 1 Applications open for returning users
Aug 15 – Sept. 15 Applications open for new users.
Spring/Summer Season – Mar. 15 – May 15 Applications open for returning users.
May 15 – 31 Applications open for new users.
*Requests received outside the seasonal process will be considered if facility time is available.

Internal Use Only:
Date Received: _____ Approved Date: _____