Student Recreation and Wellness Center

Facility Reservation Form

Washburn University

Date Reservation Submitted:		
Name of Campus Organization:		
Name of Individual Submitting Form:		
Washburn Identification Number:		
Address:		
Phone Number:		
Email Address:		
Reservation Details:		
Day(s) of the Week:		
Date(s):		
Time(s):		
# Peoble Participating:		
Brief Description of Activity:		
-		
Multi-Purpose Room	Notes:	For Office Use Only
Ichabod Room	110005.	To office ose omy
Rock Climbing Wall		
Gymnasium:		
Court 1		
Court 2		
Court 3		
Track		
Equipment/Set-Up Needs: (please indic	rate number when annronri	(ata)
Tables #	Volleyballs #	Cones #
Chairs #	Basketballs #	Scoreboards #
	Soccer Balls #	Jerseys #
TV/DVD	Other	Jeiseys #
Sound System	<u> </u>	
Dagarration Information.		

Reservation Information:

Groups must be affiliated with Washburn in order to reserve areas within the SRWC. Campus organization status will be verified with the Student Activities and Greek Life office. You will receive confirmation of your reservation status via email. All groups reserving space within the SRWC are expected to leave the facility in the condition it was in when they arrived.

updated 7/15

For Office Use Only:		
Date Received	Activity Approved	Email Verification Sent
	Sta	aff Initial
Date Available	Activity Denied (reason)	