

Facility Usage Request Form

Special Olympics
Alaska



Organization Name: _____ Work Phone: _____ Fax: _____

Requester Name: _____ E-Mail: _____ Phone: _____

Day of Event Contact: _____ Phone: _____

Date(s): _____ Gate/Doors Open: _____ Start Time: _____ End Time: _____

Name of Function: _____ Estimated Attendance: _____

*Preferred Meeting Setup: Classroom style Conference (Hollow Square) U-Shape

**Please note user is responsible for setup, maintaining and resetting room.*

Submitted certificate of insurance naming Special Olympics Alaska as additionally insured.

Reviewed Special Olympics Alaska Jim Balamaci Training Center Policy.

PLEASE CHECK THE CAMPUS LOCATIONS AND SERVICES YOU ARE REQUESTING:

- | | |
|---|--|
| <input type="checkbox"/> Upper Classroom - \$75 per hour* | <input type="checkbox"/> Elevator Use |
| <input type="checkbox"/> Lower Classroom - \$50 per hour* | <input type="checkbox"/> Wi-Fi |
| <input type="checkbox"/> Track – included with Gym | <input type="checkbox"/> Projector/Screen |
| <input type="checkbox"/> Main Gymnasium - \$100 per hour* | <input type="checkbox"/> Smartboard |
| <input type="checkbox"/> Fitness Center - \$50 per hour, must be trained* | <input type="checkbox"/> Other (Please explain): _____ |
| <input type="checkbox"/> Locker Rooms - included with Gym | _____ |
| <input type="checkbox"/> South Lawn (Outside) – please call | _____ |
| <input type="checkbox"/> Kitchen - \$75 per hour* | _____ |
| <input type="checkbox"/> Other (Please explain): _____ | |

*Hourly prices shown above will increase by \$50 per hour for reservations outside of normal business hours (M-F, 8:30am-5:00pm).

Additional Notes: _____

Please call us at 907-222-7625 ext. 611 to confirm your event at least 24 hours prior to your scheduled start:

User signature: _____ Date: _____

To Be Completed by Special Olympics Alaska:

Approval signature: _____ Date: _____

Entrance Use:

- East (Gym, Upper Training Room) Admin (Lower Training Room) Main (Used for public events only)