Woodward Center and Alumni Field – Facility Request Form

Individual Requesting Facility Space: ________________________________
Organization / Department: ________________________________
Street Address: ________________________________
City: __________________ State: __________ Zip: __________________
Requestor’s Affiliation: ________________________________
Home Phone: __________________ Work Phone: __________________
Cell Phone: __________________
Fax Number: __________________ Email Address: __________________
Title of Event and Description: ________________________________

Does your organization carry liability insurance?  __Yes  __No (all groups are required to have liability insurance–this info appears on the actual contract)

Facility Space Needed:
__Basketball__________________ # of courts (up to three)__________
__Volleyball__________________ # of courts (up to three)__________
__Batting Cages__________________ # of cages (up to two)__________
__Classroom (30 person max per room)__________________ # of classrooms (up to four)__________
__Aerobics Room/Dance Studio (67 Person max)__________________
__Indoor Track  __Outdoor Track  __Turf field  __Baseball Field  __Softball Field

Number of Participants:________________________ Age of Participants:_______________

Estimated Attendance: ________________________________

Date(s) of Event: ________________________________

Time(s) of Event (please allow appropriate time for set-up and breakdown): ________________

Residential Event?Yes_____No____ If yes, how many dorm rooms will your event require?______________________________

Will you be charging admission? Yes_____No____ If yes, how much?______________________________
Please detail any specific set-up needs (equipment, chairs, tables, meal times, media services, etc) ______________________________________________
__________________________________________________________________
__________________________________________________________________
Will you require the use of the campus pool? Yes____No_____ If yes, what times would your event need the pool times?__________________________________________________
Does your group have a need for concessions? Yes____No_____ (Must have minimum of 50 people in attendance for concessions and will be managed by Westfield State College).

Optional personal:
AV technician______
Ticket takers_______
Security__________ (May be a required component of event determined by Westfield State College)
EMT/Ambulance____ (May be a required component of event determined by Westfield State College)
Other:__________________________________________________