



321-494-4947

SPECIAL EVENTS Reservation Form

DATE & TIME _____

I require the use of:

- RACQUETBALL COURT
- BASKETBALL COURT
- SOFTBALL FIELD
- LIGHT RESERVATION
- TENNIS WARFIT SOFTBALL
- FITNESS IMPROVEMENT APPOINTMENT

1. I understand by signing this agreement, I act as the requestor for my Squadron. If approved, I will be responsible for the property I am reserving IAW base property requirements. Confirmation of your reservation will be emailed to you.
2. Forward this reservation to the Fitness & Sports Center for review by email to both:
Susan.michael.1@spaceforce.mil and **Carmen.porto@spaceforce.mil**
3. Please note: filling out this reservation request form **DOES NOT guarantee** that your request is approved.

CONTACT INFORMATION

POC NAME: _____
 DSN: _____
 Signature: _____
 DATE: _____

DO NOT WRITE BELOW - FITNESS USE ONLY

APPROVED: YES NO

NAME: _____ SIGNATURE: _____ DATE: _____