SUPPORT SQUADRON



SPECIAL EVENTS Reservation Form

DATE & TIME					
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:					
GOPATRICKFL.COM FORCE					