

UNIVERSITY OF GUAM
CALVO FIELD HOUSE
Phone: (671)735-2861 * Fax: (671)734-2170
RESERVATION REQUEST FORM

Please print or type

Date: _____

Name of Organization: _____

Address: _____

Contact person(s): _____ Phone: _____ Email: _____

_____ Phone: _____ Email: _____

Date(s) requested: _____ Times(s) From: _____ To: _____

_____ From: _____ To: _____

Will you be selling concession? YES NO

Will you be selling programs, wares and/or merchandise: YES NO

Will you be having entrance fee/ticket sales? YES NO

PURPOSE OF EVENT: _____

TYPE OF ORGANIZATION:

Commercial organization

Private organization

Nonprofit organization

UOG campus organization/unit

Government of Guam agency

UOG student organization

FACILITIES REQUESTED:

Main Arena Basketball Court Volleyball Court

Ticket Booth Food & Beverage Concession Area

Fitness Room 1 Fitness Room 2 Weight Room

Soccer/Football Field Baseball Field Other _____

SIGNATURES:

Administrative Assistance concurrence if available _____

Recreation Supervisor concurrence on request _____

Maintenance Supervisor concurrence on request _____

APPROVED DISAPPROVED

Athletic & Field House Director

Date