



APPLICATION FOR USE OF THE LAKER ATHLETIC CENTER

FACILITY REQUESTED FOR USE:

Facility/Field:

- Full Field
- Half Field
- Batting Cages – includes half field
- Mezzanine
- Track

Date(s): _____

Hours of Use: _____

Hours of Actual Program: _____

Purpose: _____

Equipment Needed: _____

Name of Organization: _____

Applicant's Name: _____ Phone: _____

Contact E-Mail: _____

Address: _____
Street City Zip

DISTRICT STAFF USE ONLY

Received _____ By _____

Approved Denied Notes: _____

Authorized Signature: _____ Date: _____