



# Health Education Center Rental Application Form

Completion of this application does not guarantee a permit will be granted  
 \*APPLICATION FEE MUST ACCOMPANY APPLICATION  
 \*MUST BE RECEIVED 2 WEEKS BEFORE REQUESTED DATE

- |  |                      |            |
|--|----------------------|------------|
| <input type="checkbox"/> UT Campus Group | \$25 Application Fee | Paid _____ |
| <input type="checkbox"/> Community Group | \$30 Application Fee | Paid _____ |

Requested Event DAY & DATE:

Applicant Name (Print): \_\_\_\_\_

*The undersigned, hereinafter referred to as the Applicant, hereby makes application for permission to use the Student Recreation Center as noted below on the date(s) specified for the purpose(s) indicated.*

Applicant Signature: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Organization Represented: \_\_\_\_\_

Title / Relationship: \_\_\_\_\_

Event Description: \_\_\_\_\_

Start Time: \_\_\_\_\_  A.M.  P.M.    End Time: \_\_\_\_\_  A.M.  P.M.    Set Up Time: \_\_\_\_\_  A.M.  P.M.

Total Number Expected: \_\_\_\_\_ Number of Chaperones: \_\_\_\_\_ Age Range of Group: \_\_\_\_\_

Areas Desired	Time:	Start	End	Check Other Needs
<input type="checkbox"/> Gym Courts	_____	_____	_____	<input type="checkbox"/> Gym Equipment
<input type="checkbox"/> Lap Pool	_____	_____	_____	
<input type="checkbox"/> Weight Room	_____	_____	_____	
<input type="checkbox"/> Track	_____	_____	_____	
<input type="checkbox"/> Dance Room	_____	_____	_____	
<input type="checkbox"/> Locker Room	_____	_____	_____	

*\* The Office of Recreation reserves the right to adjust times and assignments to meet the operational needs of the facility.*

*\* Some requests may result in additional charges or additional staffing*

*\* Payment of all rentals is due previous to entry unless approved in writing, in advance by the Director.*

*\* Personal checks must bear the name, address and phone number of the remitter, and a check sequence number.*

**\*All Participants must turn in a signed UT Release Form before entering the facility**