MONTI PHYSICAL FITNESS CENTER

FACILITY RESERVATION FORM

	www.
Point of Contact	The same of the sa
Name:	Unit:
Phone Number:	 Email:
What is your request in suppo	ort of?
Family Readiness Group	Unit Organizational Day
Private Organization	COC/COR
Personal Use/Birthday Pa	rty Unit Training
Date and Time of Event	
	From: To:
(Remember to include time for	setup and tear down)
What facilities are you request	tina?
	on #2 Pavilion #3 Pool
Field #1 Field #	
MPR 3 MPR 4	
gymnasium request, i.e., pre-de I understand if granted p	Ricardo Medeiros is the approving authority for any eployment briefings. Dermission, it is my responsibility to ensure all AR 215-1
use cardio equipment, weight e	effect. Children 12 and under are not authorized to equipment, or saunas.
It is my responsibility to page 100 MPH tape / Duct Tape is no	orovide mat tape to secure the blue floor covering. ot authorized on the covering.
Unit police call is conduct	ted. Trash receptacles are emptied prior to departure.
I acknowledge that there up fee for pavilions left unclean	is a \$25 rental fee for pavilions use, plus a \$25 clean led.
Signature	Date
For Office Use Only: Received by:	Date:

Questions may be addressed to Mr. Kevin Smith at 315-772-4806 or lloyd.k.smith.naf@mail.mil FORM UPDATED AUGUST 2018