MONTI PHYSICAL FITNESS FACILITY

RESERVATION FORM

Point of Contact for th	e Reservation Re	<u>quest:</u>			
Name / Rank :			Unit:		
Phone Number:			Email:		
What is the request in	support of:				
Town Hall / Pre- [Deployment Fair	Unit Sp	orts Day	Private Orga	nization
COC / COR					
Date and Time of Rese	rvation:				
Month:	Day:	From:		То:	
(Do not forget seat up	and tear down tir	me)			
What facilities are you	requesting:				
Pavilion #1 I	Pavilion #2 F	Pavilion #3	Field #1	Field #2	Field #3
Indoor Turf field _	MPR 3	MPR 4			
G3 Chief of Tra request. i.e. pre-deploy	-			•	any gymnasium
I understand if policies remain in effec Equipment or Saunas.					215-1 Fitness Facility dio Equipment, Weight
It is unit respor MPH tape/ Duct Tape i				ecure the blue	floor covering. 100
Unit police call	is conducted. Tra	ish receptacle	s are emptie	d prior to depa	rture.
upon proper clean up.			or pavilions. \$	25 clean up de	eposit that is refundable
Signature			Date		
For Office Use Only:					
Received by:			Date:		
QUESTIONS O	CAN BE ADDRESS	SED BY CONT	ACTING: AI	Janssen at 31	5-772-4806 or
	alle	en.y.janssen.	naf@mail.m	nil	