Wellness Center space request
RESERVATION APPLICATION

Applications must be submitted a minimum of three (3) working days prior to the event, otherwise, applications will not be accepted.

Applicant Information:

Name: _____ (Org President only)
Submitted on: / /

Address: _____

Phone Number ( ) Work Number ( )

E-Mail Address: _____@_____

Group Fitness Room (134-holds up to 25 ppl.):_____
Yoga Room (104-holds up to 12 ppl.)_____
(Both rooms have mirrors on the wall.)
Basketball court(s)-1 or 2 _____

(UCO RESERVES THE RIGHT TO CHALLENGE ANY ORGANIZATION'S STATUS)

Organization: Date initiated:

Name of Activity:

Org. Acct. #:

Advisor/Dean name:

Advisor/Dean ph. and email:

Advisor/Dean signature:

(For Group approval, Advisor/Dean must sign form for reservation to be accepted.)

Description of Activity: (All reservations are restricted to 3 times per semester)

Dates: **Times:**

_____ _____

_____ _____

_____ _____

Restrictions:
*** You must provide your own audio/visual equipment; Wellness Center equipment use not allowed without permission.**
*** Must end 30 mins. prior to building closing.**
*** Clean room/equipment and turn off all fans**
*** Non-UCO hired professionals are not permitted to provide instruction in the Wellness Center.**
***All participants/attendees must be 18 years or older.**

For more information, please contact Khari Huff at 405-974-3119/ khuff4@uco.edu or Valerie Manriquez at 405-974-3135/ vmanriquez@uco.edu