

Margaret M. Clark Aquatic Center
Facility Request

Date _____

Name _____ Campus/Department _____

Event _____ Date of Event _____

Purpose of Event _____

Beginning Time _____ Ending Time _____

Specific Accommodations _____

Area Requested: _____ Competitive Pool
_____ Adaptive Pool
_____ Classroom
_____ Weight Room
_____ Concession Stand
_____ Courtyard
_____ Bleachers

Please indicate any other specific requests: