



## Facility Booking Request

### Contact Information

First and Last name:

Student ID (if applicable):

Address:

Phone:

Email:

Organization/Group Name (if applicable):

Main contact at event/program (if different from above contact information)

First and Last name:

Phone:

Email:

### Rental Request Details

Event Type:

TCSA approved group  
Recreation group/club  
Meeting/Social  
Special Event

Expected attendance  
(including spectators):

\_\_\_\_\_

Frequency:

- One Time  
 Once a week  
 Multiple times per week

Space Requested (select all that apply):

Justin Chiu Stadium – Field	Gymnasium – Full
Justin Chiu Stadium – Track	Gymnasium – Half
Beach Volleyball Courts	Fitness Studio 1
25m Allan Marshall Pool	Fitness Studio 2
Carol Love Rowing/Paddling Tank	Classroom
Rock Climbing Wall	Squash Court
P.S.B Wilson Lounge	First Aid Room
Mezzanine	Main Lobby
Varsity Change Room	

Preferred day(s) Requested (select all that apply)

Monday	Tuesday	Wednesday	Thursday
Friday	Saturday	Sunday	



Preferred date & time (including set up/tear down)		Athletic Centre equipment required for the rental: (Additional fees may apply)
Start Date: _____	Start Time: _____	
End Date: _____	End Time: _____	
Additional or alternative dates & times (including set up/tear down)		
Start Date: _____	Start Time: _____	
End Date: _____	End Time: _____	
Start Date: _____	Start Time: _____	<input type="checkbox"/> Tables (include #) _____ <input type="checkbox"/> Chairs (include #) _____ <input type="checkbox"/> Sport Equipment (include type & #) _____  <input type="checkbox"/> A/V equipment <input type="checkbox"/> Justin Chiu Stadium - Scoreboard <input type="checkbox"/> Gymnasium – Scoreboard <input type="checkbox"/> Staff Assistance for set up/tear down <input type="checkbox"/> Other, please list: _____ _____
Start Date: _____	Start Time: _____	
End Date: _____	End Time: _____	

Provide a brief description of the activities that will take place during your event/program:

Please list any equipment that you plan to bring on-site or any external service providers (Including but not limited to sports equipment, a/v equipment, external catering) Please note that all external equipment must be provided to Trent Athletics 10 days before the event for review and approval.

Please list any special requirements/comments (including but not limited to dates that need to be excluded from recurring events, extra time not included in your rental period etc.)

**Return this completed form by email: [acbookings@trentu.ca](mailto:acbookings@trentu.ca)**

Any facility rental inquiries can be directed to Rebecka Schultz, Finance and Facility Booking Coordinator, at 705-748-1011 ext. 7521 or by email at [acbookings@trentu.ca](mailto:acbookings@trentu.ca)

1600 West Bank Drive, Peterborough, ON K9J 0G2 | [www.trentu.ca/athletics](http://www.trentu.ca/athletics) | 705-748-1011 ext. 7521

The personal information on this form is collected under the authority of the Trent University Act, 1963 Section 18 (3) (c) and is needed to register you for a membership at the Trent Athletics Centre. The information will be used to create your membership profile. If you have any questions about the collection or use of this information by the University, please contact: Leslie Spooner, Assistant Director, Customer Engagement & Operations, Department of Athletics & Recreation, Trent University, 705-748-1011 x7633 or [lesliespooner@trentu.ca](mailto:lesliespooner@trentu.ca)