

Application for use of the

## **Saville Community Sports Centre VOLLEYBALL Gyms/ Courts**

NB: Each Volleyball Gym (Gyms 7, 8 & 9) has 3 courts.

The following Basketball Gyms have this number of volleyball courts (Comp Gym plus Gyms 1-5 have 2 courts each, while Gym 6 has 3 courts)

ORGANIZATION COI	NTACT INFORMATION:	
Name of Organization:		Adult or Youth Booking?
Event Name (If applicable)		Adult Group  Please check appropriate box
Contact Person:		
Telephone Numbers:		
Day		
Evening		
Cell		
Fax		
Email		
Mailing Address		
City / Town		
Postal Code		
Type of Event		
Other		
Special Notes:		
	mplete this application by filling in	the Court Request Form
Office Use:		
Date:		
Contract / Invoice #		

## **COURT REQUEST FORM:**

	SINGLE	DAY BOOKING	REQUESTS:				
					Number of		Number of
					Courts		Gyms
	Day	Date	Start Time	End Time	Requested	or	Requested
1						or	
2						or	
3						or	
4						or	
5						or	

	REOCCU	JRRING BOOKII	NG REQUESTS:	(Leagues, Pro	ograms, Clinic	cs, Camps)			
							Number of		Number of
							Courts		Gyms
	Day	Start Date	End Date	Start Time	End Time	Excluded Date(s)	Requested	or	Requested
1								or	
2								or	
3								or	
4								or	
5								or	
6								or	
7								or	
8								or	
9								or	
10								or	

Excluded Dates: Dates you would like to skip, ie. Holidays, etc.

	TOURNAMENT BOOKING REQUESTS:						
					Number of		Number of
					Courts		Gyms
	Day	Date (M/D/Y)	Start Time	End Time	Requested	or	Requested
1						or	
2						or	
3						or	
4						or	
5						or	
6						or	
7						or	
8						or	
9						or	
10						or	

Please e-mail this completed form to evcsvolleyball@gmail.com or call 780-492-8600