

CARC Party Reservation Request Form

Requested Date of Party: _____ Requested Time: _____

Back-Up Date: _____ Back-Up Time: _____

Party Host: _____ Phone Number: _____

2ND Number: _____ Email Address: _____

CARC Reservationist/Online: _____

Date: _____

FOR OFFICE USE ONLY

Has the request been submitted into R25? Yes No Signature: _____ Date: _____

Has the request been approved in R25? Yes No Signature: _____ Date: _____

Has the party been confirmed with the party host? Yes No VIA: Phone Email In-Person

Was the deposit collected? Yes No Amount Collected: \$ _____ Balance Due: \$ _____

Signature: _____ Date: _____

Rooms and Facilities Reserved:

Competition Pool Warm Water Pool Studio #932 AB Classroom #931 Gymnasium L C R

TIMES _____

Additional Notes:
