



**Rec Sports Partnership Application\***  
**Department of Recreational Sports**

\* Application must be submitted with a completed facility reservation form.

**Section I: Contact Information**

Name of Organization/Group: \_\_\_\_\_  
Name of person making request: \_\_\_\_\_  
Cell/primary phone: \_\_\_\_\_

Date submitted: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Office/home phone: \_\_\_\_\_

**Section II: Event Information**

Date of event: \_\_\_\_\_ Name of Event: \_\_\_\_\_  
Description of the event: \_\_\_\_\_

Anticipated number of people in attendance: \_\_\_\_\_

The event is open to:

\_\_\_ A&M Students/ Rec Members \_\_\_ Faculty/Staff \_\_\_ Minors (under age of 18) \_\_\_ General Public

Type of event: \_\_\_ Meal \_\_\_ Meeting/seminar \_\_\_ Dance/social \_\_\_ Sport tournament/games  
Other (specify) \_\_\_\_\_

Are you charging a fee for people/groups/teams to participate: yes \_\_\_ no \_\_\_ If yes, how much:  
\$ \_\_\_\_\_

Has your group/organization received a Dept. of Recreational Sports partnership in the past? yes \_\_\_ no \_\_\_  
If yes, please list month and year: \_\_\_\_\_

**Section III: Justification for Partnership**

Briefly describe how the Rec Sports and its members will benefit by partnering with organization on event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section: IV Budget and Vendors**

Please attach an itemized budget for the event including anticipated expenses and income. If you have corporate vendors/sponsors, please list the names of the vendors and the products (if applicable) they wish to distribute to the participants.

**Section V: Partnership Request**

Please attach the Dept. of Recreational Sports Facility Reservation form to this request with all appropriate sections completed. If approved, your allocation will be based upon the information submitted. Any changes made after the sponsorship application has been processed may result in charges to the organization/group.

Facility and Room Total \$ \_\_\_\_\_  
Equipment Total \$ \_\_\_\_\_  
Other Total \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_  
Amount Requested for Partnership \$ \_\_\_\_\_

<b>Office Use only</b>	
Approved _____	Denied _____
Room/Facilities	\$ _____
Equipment	\$ _____
Other	\$ _____
Partnership Total	\$ _____
_____ Dennis Corrington, Director Department of Recreational Sports	
Date: _____	
Reservation # _____	
Invoice # _____	