

TOURNAMENT/EVENT/PROGRAM REQUEST FORM

Requester's I	Name			Da	Date of Request			
Dates Requesting				Du	Duration			
Description o	of Event:							
Who will be a	allowed to p	participate?	Who will be	enefit from this	offering?			
What fees will be associated?								
Will this be C	CPTC staff ru	ın or run by	someone el	se?				
Indicate below, on desired days - requests for times, number of courts, and number of participants:								
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Time								
Number of Courts								
Gender and Number of Participants								
If there is an option for another time/day please submit on another sheet. Have you reviewed current court usage? What do you think the impact will be on court usage if this is approved? All request forms must be filled out completely before they will be reviewed by the Tennis Committee and recommended to the Board for approval or denial.								
Requester's Signature Date				Tennis Coi	ennis Committee Chair Date			
Requester's	contact info	rmation (er	nail/phone):	:				
Date Presented to the Board Signature of Officer				Арр	prove	Decline		