

Sac State Aquatic Center Rowing Equipment Request Form

Date Submitting Request:	
Date Requesting Usage (<i>*one date only please!</i>):	
Time Requesting Usage:	

****Equipment Requests MUST be made at least one week in advance****

Reason for Request (circle one):	Race	Work-Out	Other
If race, please list event number with each boat.			

	Boat	Oars
First Choice Request		
Second Choice Request		

Please list names of club members using the equipment.

Notes:

8x	8x	4+/4-/4x	2-/2x
C-	C-	C-	2-
8-	8-	4-	B-
7-	7-	3-	2-
6-	6-	2-	B-
5-	5-	B-	2-
4-	4-	C-	B-
3-	3-	4-	1x
2-	2-	3-	
B-	B-	2-	
		B-	

Contact Person	
Organization/Group	
Phone	
E-mail	

Approved or Declined by:		Date:		Time:	
Reason for Decline:					

* Please fill out one sheet per request