

FACILITY RESERVATION INQUIRY FORM

Hydaway Outdoor Center

All information must be entered to ensure timely scheduling!

Contact Information

1. Please provide the following Point of Contact (POC) information:

Name: _____

Cell Phone Number: _____

Email Address: _____

Legal Address: _____

LUID (if current or previous LU Student/Faculty/Staff): _____

2. If the requested event is for personal use, please select your affiliation with Liberty University:

Current Student/Faculty/Staff

General Public/Alumni

3. If the requested event is for an external organization, please list your legal business name **and** address.

General Reservation Information

4. Please provide the specific location(s) at the Hydaway Outdoor Center that you are requesting to reserve, as listed on our [Campus Recreation Facility Reservations webpage](#).

5. Please provide the name / title of the requested event:

6. Please provide a description of the requested event including purpose, theme, and activities involved.

7. Please list all equipment, decorations, games, crafts, etc. that you are requesting to bring to the facility for the event.

8. Please indicate if the requested event is private or open to the public:

Private Event

Public Event

9. Please list the preferred reservation date(s) **and two backup dates.**

10. Please list the proposed timeline for the event:

Set-Up Start Time: _____

Event Start Time: _____

Event End Time: _____

Tear-Down End Time: _____

11. Who **and** how many people are anticipated to attend the event?

12. How many adults will be in attendance (18 years of age and over)? How many minors will be in attendance (under 18 years of age)?

13. Will there be food at this requested event?

Yes

No

If yes, will it be:

Brought to campus by someone in your party.

Delivered to campus by food company, please list the company name:

Catered/served on-site by company, please list the company name:

14. Will you be hiring any external vendors for the requested event (i.e., Food truck, DJ, caterer, photographer)? If yes, please list the type of vendor and business name below.

Yes

No

15. Will the requested event be ticketed and have a guest admission fee? If yes, how will you be handling ticketing?

Yes

No

16. Will the requested event require registration and is there a fee associated? If yes, how will you be handling registration?

Yes

No

17. Will the requested event or activity have anything to do with fundraising or donations? If yes, please provide more information.

Yes

No

Hydaway Outdoor Center Resources

18. Please indicate which of our resources you would like to request for the event (*only available for Pavilion reservations with approval dependent on availability and intended use*):

Speaker Access with PCDI Sound Box

Microphone & Stand (*two available*)

8ft Rectangular Tables (*in addition to the existing 14 picnic tables to accommodate your expected head count*)

6ft Round Tables (*in addition to the existing 14 picnic tables to accommodate your expected head count*)

Metal Folding Chairs (*in addition to the existing 14 picnic tables to accommodate your expected head count*)

Charcoal Grills (*only available on a first come first served basis – must bring charcoal*)

Hydaway Outdoor Center Supplementary Activities

19. Please indicate which of our activities you would like to participate in on the day of the event (*only available on a first come first served basis*):

Yard Games

Basketball

Swimming

Volleyball

Fishing

Kayaks/Canoes/Paddleboard