

FACILITY RESERVATION INQUIRY FORM

LaHaye Recreation & Fitness Center (Private Group Ex Class)

All information must be entered to ensure timely scheduling!

(each individual class is \$50)

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): _____

Internal LU Organizations (ONLY)

2. If your requested event is for an official Liberty University organization / department / group, please select the organization below and list its name:

☐ LU Academics: _____

☐ LU Athletics: _____

☐ LU Club Sports: _____

☐ LU Department: _____

☐ *LU Residence Hall: _____

**Please list Resident Director Name, Email Address, and Phone Number:*

☐ *LU SGA Club: _____

**Please list SGA Club Faculty Advisor Name, Email Address, and Phone Number:*

☐ Other: _____

General Reservation Information

3. Please provide the class format(s) that you are requesting to reserve, as listed on our [Campus Recreation Group Exercise webpage](#). You can request both Standard class formats as well as Group Ex Plus class formats.

4. Please provide the name of your preferred group ex class instructor, as listed on our [Group Exercise Instructors](#) webpage: ****not required***

5. Would you like your instructor to cater the class to a specific theme? If so, provide a description of the requested theme.

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

7. Please select your preferred timeframe. We will contact you regarding what time works for your preferred instructor's schedule.

- ☐ Morning: 6:00 am – 10:00 am
☐ Midday: 10:00 am – 2:00 pm
☐ Afternoon: 2:00 pm – 6:00 pm
☐ Night: 6:00 pm – 10:00 pm

8. How many people are expected to attend the event? *If headcount exceeds maximum studio capacity an additional reservation(s) will be required.*
