

# Marcelle Athletic Complex Rental Worksheet

Complete and return to:  
Maryette Stuart/Indoor Facilities Assistant  
515 Loudon Road  
Loudonville, NY 12211  
518-783-4219 (office)  
518-783-2992 (fax)  
[mstuart@siena.edu](mailto:mstuart@siena.edu)

DATE: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Please check if contact person is a Siena College Alumnus \_\_\_\_\_

If so, year graduated \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Thank you for your interest in renting the fine athletic facilities at Siena College. Please provide us with the following information and add any additional requirements that may be required.

Date(s) of event: \_\_\_\_\_

Purpose of event: \_\_\_\_\_

Event Name: \_\_\_\_\_

Description of event: \_\_\_\_\_

	<u>Time building opens/usage begins</u>	<u>Time building closes/usage ends</u>
Sun:	_____	Sun: _____
Mon:	_____	Mon: _____
Tue:	_____	Tue: _____
Wed:	_____	Wed: _____
Thu:	_____	Thu: _____
Fri:	_____	Fri: _____
Sat:	_____	Sat: _____

**AREAS of USE:**

- \_\_\_\_\_ Callanan Field House - (4) rubber all purpose courts
- \_\_\_\_\_ ARC - (3) wooden basketball courts
- \_\_\_\_\_ Swimming pool
- \_\_\_\_\_ Racquetball courts (2)
- \_\_\_\_\_ Aerobics room
- \_\_\_\_\_ ARC Lobby
- \_\_\_\_\_ Baseball Field
- \_\_\_\_\_ Softball Field
- \_\_\_\_\_ Soccer Field
- \_\_\_\_\_ Outdoor tennis courts
- \_\_\_\_\_ Artificial turf field
- \_\_\_\_\_ Indoor Track

**EVENT REQUIREMENTS:**

- |                                   |  |                   |
|-----------------------------------|--|-------------------|
| _____ bleachers                   | _____ tables/chairs                      | _____ field lined |
| _____ scoreboard/clock (ARC Only) | _____ concession stand (Siena Athletics) | _____ bases       |
| _____ team benches                | _____ extension cords (list amt. needed) |                   |

**ADDITIONAL REQUIREMENTS :**

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Number of participants expected \_\_\_\_\_

Estimated age range of participants \_\_\_\_\_

List anticipated counties/state(s) of participants \_\_\_\_\_

Number of spectators expected \_\_\_\_\_

**Procedure:**

This worksheet is only a request for usage. Upon submission of the worksheet:

1. The facility manager will assess whether the facility is available for the requested date(s) and time(s).
2. The rental fee plus additional expenses will be calculated and reviewed with the contact person.
3. If all is agreed upon then a rental contract will be prepared and sent out along with an invoice.
4. When you receive the contracts you will need sign both copies and return one copy to the Indoor Facilities Assistant.
5. A certificate of insurance for 3 million dollars per occurrence will also need to be issued no later than 10 days prior to the event.

All requests for facility usage are subject to review by Siena's compliance staff to ensure compliance with all applicable NCAA regulations. Additional information may be requested.

Approved by: \_\_\_\_\_  
Signature of compliance staff member

*NOTE: The Siena Athletics facilities are generally not available during the Fall and Spring semesters while students are in residence.*