

# SANDIA PREP

## Master Calendar Event Request

Today's Date 7-6-12 Requested by: Tommy Smith  
Contact Phone Number: 401-8822 email: t.smith@sandiaprep.org

What: Name of Event: Crund Time Fitness Camp  
Description of Event: Camp (Soccer)

When: Start: 8/6/12 Time: 8 (AM) M  
End: 8/16/12 Time: 11:00 (AM/PM)  
Setup Time \_\_\_\_\_ AM/PM Depart Time \_\_\_\_\_ AM/PM (for trips)  
Breakdown \_\_\_\_\_ AM/PM Return Time \_\_\_\_\_ AM/PM (for trips)

Where: Locations of Event: West Main Soccer Field

Who: SPS Groups Involved: SP Soccer Programs  
Grade: 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_ 10 \_\_\_\_\_ 11 \_\_\_\_\_ 12 \_\_\_\_\_  
Other Groups/Schools Involved: \_\_\_\_\_  
Total Number of Participants: \_\_\_\_\_

About: Departments: Athletic  
Activity Type: Soccer  
(i.e. Social event, Baseball, Soccer, chess club)  
Event Type: Camp  
(i.e. assembly, game, practice, meeting, dance)  
Equipment Needed: \_\_\_\_\_  
(i.e. table, chairs, electronic, technical, sound, etc.)

Sporting event - Home \_\_\_\_\_ Away \_\_\_\_\_ (at: \_\_\_\_\_)

Setup Instructions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Documents to be Attached to file: \_\_\_\_\_  
\_\_\_\_\_

Events Coordinator \_\_\_\_\_ Director of Studies \_\_\_\_\_ IT Dept \_\_\_\_\_  
Athletic Director \_\_\_\_\_ Maintenance \_\_\_\_\_ scanned \_\_\_\_\_  
Business Office \_\_\_\_\_ Coordinator(s) \_\_\_\_\_ attach. \_\_\_\_\_