



Request for Use of Facilities and Food Services

Date _____ Res # _____

Outside Organization/NMCC Department _____ Account No. _____

Billing Address _____

Contact Name _____ Phone _____ Email _____

Event Name _____ Setup Count _____

Date(s) of Event _____ Start Time _____ End Time _____

Building/Room Requested _____

Building/Room Requested _____

Food Service (check all that apply) Start Time(s) _____ End Time(s) _____

- Breakfast
- Lunch
- Dinner
- Snacks
- Beverage Service
- Reception
- Delivery
- Cash Bar
- Open Bar
- Custom Catering
- All-day Package
- Other

Menu/Instructions _____

Audio | Visual | Technology (check all that apply)

- Projector
- Screen
- Gym Video Wall
- PA System
- Laptop
- Conference Phone
- Tech Support
- Internet/Wifi

Instructions _____

(If you are using your own equipment, please specify what it is and how you need it to integrate with NMCC equipment.)

Room Set Up (check all that apply)

- 5' Round Tables (8 chairs max)
- 6' Rectangle Tables (6 chairs max)
- 8' Rectangle Tables (8 chairs max)
- Tall Cocktail Tables
- Horseshoe
- Square
- Classroom Style
- Rows of Chairs
- Linens
- Stage
- See attached diagram
- Exterior Signs
- Interior Signs
- Other

Instructions _____

