

Los Volcanes Senior Center
Activity/Room Reservation Request

PROGRAMMER: _____

Today's Date: _____

Contact Information

Name: _____

Phone: _____

Activity Information

Class/Activity/Presentation: _____

Participants (approx.). _____

Dates and Times

*****PLEASE INCLUDE SETUP & TEAR DOWN TIME IN YOUR ROOM REQUEST*****

One time Short Term

Long Term (**All requests must be renewed each year by December 1**)

Frequency: Weekly Twice a month Monthly Other _____

Day: Monday Tuesday Wednesday Thursday Friday Saturday

Start Date _____ End Date _____

From _____(am/pm) to _____(am/pm) OR

I prefer morning _____ afternoon _____

All room reservations (classrooms & social hall) must end by 5:00 p.m.

Fees: Free

Fees _____

If charging a fee, you must pay the City of Albuquerque \$7.50hr/classroom or \$10hr/Social hall.

All room reservations require a signed Facility Agreement. (See the front desk)

Set-up, equipment request and description of class:

Set-up Style: Classroom ___ Theatre ___ Conference ___ U-shape ___ Picture Frame ___ Banquet ___

Television/DVD ___ Smartboard ___ Projector/laptop ___ Podium ___ Microphone ___ Other _____

NOTE: Special circumstances may cause a disruption in room scheduling. We reserve the right to cancel or relocate a reservation. No guarantee on request being approved. Request can take up to 30 days for processing.

****All participants are required to obtain a membership****

Office Use Only

Approved by: _____ Agreement: _____ Approved date: _____

Comments: