

SWIM CENTER FACILITY RENTAL FORM

EVENT INFORMATION

Date Submitted:	Date(s) Requested:
Time(s) Requested:	A.M. or P.M. To:A.M. or P.M. (available rental times: 9am to 11am, 4pm to 10pm)
Event:	
Organization Name:	Phone: ()
Organization Representa	ative:
Address:	_
City:	Zip:
	<u>FEE</u> s for 50 swimmers). For 51-74 swimmers, an additional \$30/hour is required. For 75-99 swimmer is required. Providing enough staff will ensure the safety of all swimmers.
Number Expected:	
Adults:	
Children:	
PAYMENT METHOD Online Payment: NMIN	AT M-Mountain Mall (https://secure.touchnet.com/C22533_ustores/web/)
NMT Department:	Account Number:
Email Address:	Phone #:
Note: Cancellations mus	st be made 48 hours prior to the event or a late cancellation fee of \$30 will be billed.
SPECIAL REQUESTS (spe	ecify any other requests such as lap lanes up or down, umbrellas at picnic tables, etc.)
Submission of a request	does not guarantee approval. Do not advertise event until you receive final approval.

EMAIL form to:

Amanda Saenz (amanda.saenz@nmt.edu)
Assistant Director, Recreation and Well-Being
575-835-5852 (office) or 575-835-5221 (swim center)