



MESALANDS COMMUNITY COLLEGE

911 South Tenth Street
Tucumcari, New Mexico 88401
(575) 461-4413, ext. 114
FAX (575) 461-1901

FACILITY USE FORM

Organization: _____

[] For Profit/Private [] Non-Profit

Address: _____

Telephone: _____ Fax: _____

Contact Person: _____

Type/Name of Program or Event:

Date(s) requested: _____ Time requested:

Number of participants: _____

Seating required: [] Classroom [] Conference [] Meeting [] Office Space

Special services/equipment required: _____

Charges (Please make checks payable to Mesalands Community College upon receipt of Invoice)

Table with 2 columns: Item description and Amount. Items include Classroom (full day or half day), Great Room, NAWRTC Lecture Hall, Commons Area or Courtyard, Prep Room, Overhead or Slide Projector, InFocus Projector (on/off campus), Stage, Coffee Pot, Table Place Settings, Tablecloths/skirts, Facilitator (regular/off hours), Cleaning Fee (if needed, to be determined), Room Setup (outside normal setup or Great Room), and DEPOSIT (Refundable) with a value of 150.00.

Mesalands Community College prohibits the use of food and/or drinks in classrooms and conference rooms without prior permission. All buildings occupied by Mesalands Community College are smoke free. Tobacco products of any kind are strictly prohibited. Thank you.

Signature of responsible party/Date

Secretary, Dean of Academic Affairs

Typed name/title of responsible party

Room(s) authorized for use

Total Amount Due \$ _____

Date Paid _____