

## TownLake YMCA Facility Rental Interest Form 1100 W. Cesar Chavez, Austin, TX 78703

| Date:   | Email:   |  |  |
|---|--|--|--|
| Contact Person:   |  |  | D.O.B  |
| Phone: (Cell)   |  | (Home/Work)  |  |
| Address:  |  |  |  |
|   |  |  | Zip:   |
| <b>Event Information</b>  |  |  |  |
| Circle one: Individ   | dual Business  | School   | Non-profit (proof of 501(c) (3) status required)   |
| Start Date:   | Start Time:  | End Date:  | End Time:  |
| Name of Individual/Bus  | siness/Organization:   |  |  |
| Estimated # of guests:  | Describe e   | vent or activity:  |  |
| Facilities of Interest *pi  |  | -  | iomulti-purpose room (AMP)   |
| Rental Rates Conference Room* Group Ex Studio Yoga studio Multipurpose Room (AMP) Tables and Chairs: Swimming Pool:   | \$75/hours (50 persor<br>\$50/hour (30 person<br>\$50/hour (30 person<br>\$15 in addition to rental  | maximum) *includes<br>n maximum)<br>maximum)<br>maximum)<br>rate (up to 10 tables an   | d 30 chairs available) for AMP Room onal pool during non-peak times  |
| <ul> <li>Reservation til reservation til reservation til</li> <li>In Multipurpos staff may unle</li> <li>All trash must</li> <li>Floors should</li> <li>Room should</li> <li>Space is avail</li> <li>No alcoholic b</li> <li>Noise levels n</li> <li>Please do not</li> <li>There must be</li> <li>Reservation</li> </ul> | me se Room (AMP), all chairs/ta seck closet but are not respon be put into a trash can or to be swept up of all food be left in the same condition able for up to maximum cap everages/tobacco allowed or nust be kept to a minimum if use double-sided tape for de e a two-week notice for canc is not secured until paym aive, release, absolve, inder d claims or injury sustained of | bles used must be put a<br>nisible for setup or clean<br>aken outside of the build<br>as when rental group a<br>acity listed above<br>n site<br>f YMCA programs are ru<br>ecorations. Do not nail,<br>rellations and refund. | cess to the room before the start of rental away in the storage closet at the end of the event; up of tables/chairs ding arrives  nning in adjacent rooms tack or put holes in the walls  harmless the YMCA, the organizers, volunteers, |
| Signature   |  |  |  |
| Diagonal materials  | Same to Dante  | E43 E43 0633   |  |

Please return completed form to Renee Deeter, 512.542.9622, renee.deeter@austinymca.org

Please submit this form at least 3 weeks prior to your desired rental date. Submission of this form does not guarantee a reservation. Please allow at least three business days for review.

\*\*Upon approval of this request a formal contract will be created and proof of general liability insurance in the amount of \$1,000,000 naming the YMCA as an additional insured may be required to secure reservation.

| Paid Amount | _Calendar | Staff: |
|-------------|-----------|--------|
|             |           | -      |