

**West Dallas Multipurpose Center
MEETING ROOM RESERVATION
POLICIES AND PROCEDURES**



Eligibility

An organization utilizing the West Dallas Multipurpose Center (WDMC) facility must be a private, non-profit (501c3), public, educational, or voluntary community organization. Approved activities must include the following: health and human service programs; planning and development; education and training, and cultural activities. All room reservation requests must be made within thirty days of the actual meeting date. No room reservation requests will be granted beyond thirty days. Each NEW room reservation request will require a signed contract. Organizations that use the facility monthly will need to submit a RENEWAL request for a room reservation every month indicating dates and times for that month.

Hours of Operation

The facility is available for use Monday through Friday from 8:00 a.m. to 8:30 p.m. (Weekend activities must be arranged in advance and will be charged a fee for security and custodial services. More information is available upon request).

Gambling/Smoking/Alcoholic Beverages, Illegal Drugs

Gambling, smoking, or possession of alcoholic beverages and/or illegal drugs is strictly prohibited on the premises.

Weapons

No guns, knives or other weapons are allowed on the premises.

Conduct/Security

Do not use doors other than the Northeast main entrance. Use of offices and rooms not designated for use in this agreement is strictly forbidden and will be grounds for cancellation or denial of future use of the facility. The activity sponsor is responsible for the conduct of all event participants. The sponsor will make every effort to ensure that all rules and policies are strictly adhered to. Participants will be expected to cooperate fully with the security officers. Violators will be escorted off the premises, and the sponsor may not be invited to utilize the facility in the future.

Pets

Animals, with the exception of medical assistance animals are strictly prohibited.

Room Set-up and Clean Up

The activity sponsor should arrive 10 to 15 minutes before the start of the event to arrange the room and acquire needed equipment. The activity sponsor is responsible for setting up the room____, cleaning the room____, returning equipment borrowed____, and restoring furniture to its rightful position____ following the event. The sponsor is also responsible for disposing of garbage____ in the dumpster located in parking lot. Failure to comply with this policy will result in a denial of future use of the facility. (Please initial in each area acknowledging you understand the policy) .

Eating/Drinking

Food and beverages are limited to the vending machine areas only. The activity sponsor is responsible for cleaning spills, picking up trash and disposing of properly. Food and drinks may be allowed in the activity rooms with prior approval from management.

Property Damage

The sponsoring organization must report any damage to the facility and/or its contents within 24 hours of the event. Payment for damage may be required. Reports may be made to the security officer on duty.

Children

Children under 17 must be supervised and accompanied by a responsible adult at all times.

AGREEMENT

I, _____, have read and understood the policies and procedures outlined above and agree to abide by them during my use of the facility and agree to indemnify and hold the City of Dallas, its officers and employees, harmless against all claims, lawsuits, judgments and expenses for personal injury (including death), or property damage, that may arise out of use of the facility.

Signature: _____ Date: _____

Approved: _____ Date _____ Not approved: _____ Date: _____

Signature: _____ Date: _____

MEETING ROOM RESERVATION

West Dallas Multipurpose Center
2828 Fish Trap Road
Phone: 214.670.6341 - Fax: 214.670.6463



APPLICATION DATE: _____

AGENCY/ORGANIZATION NAME: _____

DIRECTOR/CEO: _____ BUSINESS TYPE: _____

APPLICANT: _____ TITLE: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____ WEBSITE: _____

TELEPHONE: _____ FAX: _____

EVENT INFORMATION:

TYPE OF ACTIVITY: _____ #PARTICIPANTS EXPECTED: _____

DATE: _____ TIME: _____ DATE: _____ TIME: _____

DATE: _____ TIME: _____ DATE: _____ TIME: _____

WILL FOOD OR BEVERAGES BE SERVED? FOOD _____ BEVERAGES _____

ROOM(S)/AREA REQUESTED:

____ ACTIVITY ROOM 1 (50)	____ ACTIVITY ROOM 2 (50)	____ BOTH ACTIVITY ROOMS (100)
____ ADULT HEALTH CLINIC	____ ARTS & CRAFTS	____ CLASSROOM (25)
____ CONFERENCE ROOM (16)	____ KITCHEN	____ LOBBY (147)
____ OFFICE 1	____ OFFICE 2	____ OUTSIDE

EQUIPMENT NEEDS:

____ PODIUM ____ MICROPHONE ____ OVERHEAD PROJECTOR & SCREEN

____ TABLES (HOW MANY) _____ ____ CHAIRS (HOW MANY) _____

EQUIPMENT CHECK-OUT: RECEIVED BY: _____ WDMC STAFF: _____

EQUIPMENT CHECK-OUT: RETURNED BY: _____ WDMC STAFF: _____

Date Approved: _____ Date Confirmation Sent: _____ Method of Confirmation: _____