

Facilities Reservation Form

Completed forms can be submitted to NHHC_NMAS@us.navy.mil. Reservations are not confirmed until you receive a confirmation message from National Museum of the American Sailor staff.

POINT OF CONTACT	
Name:	
Email:	Phone:
ABOUT THE EVENT	
Name of Sponsoring Organization:	
Event Name:	
Event Type:	
☐ Meeting ☐ Training ☐	☐ Other (please indicate):
Date of Event:	
When scheduling your arrival and departuincludes setup and cleanup of event. Time or participants are	of event refers strictly to the time guests
Arrival Time:	
*Earliest arrival time is 9:00 am	
Departure Time:	
*Latest departure time is 5:00 pm	
Time of Event:	
Number of Expected Attendees:	

EVENT NEEDS	
A/V Equipment Needed:	
□ NMCI laptop □ Regular laptop □ Microphone	
☐ Projector screen ☐ Projector ☐ Speakers	
Tables and Chairs Needed (indicate how many, when applicable):	
Chairs (100 available) 6 ft. rectangular tables (9 available)	
☐ Podium (1 available) ☐ U.S. flag (1 available) ☐ Navy flag (1 available)	
☐ Stage (1 available)	
FOOD/DRINKS	
Food and drink are allowed in museum facility reservations. Any catering and serving of alcoholic beverages must be provided by Naval Station Great Lakes MWR Port O' Call. Light appetizers and/or baked goods may be brought in independently of Port O' Call with the prior approval of museum staff.	
Will food or drink be served? ☐ Yes ☐ No	
Will alcohol be served? ☐ Yes ☐ No	
<u>Please note:</u> By signing this form, you agree to independently contact MWR and to only serve alcohol served by MWR.	
Serve alconorserved by MWM.	
I have read and will comply with the Terms of the Museum Facilities Use regarding use of the National Museum of the American Sailor. Terms of Use are available at www.history.navy.mil/nmas under the Events tab.	
Signature Date	
STAFF USE ONLY:	
Confirmation Number: Confirmation Date:	
Confirmed by:	