Primary Contact Information:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_  
Name of Business/Institutions/Office:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_

Date(s) and Time(s) of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Event/Description: \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Attendees: \_\_\_\_\_\_\_\_

Maximum Capacity is 120 guests. ***Tables and Chairs available upon request***

**Payment Method:**

**METHOD 1: Interdepartmental Transfer (Navajo Technical University Faculty/Staff *ONLY*)**

**Charge to Account Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Payment to the Hospitality Center

By signing of this invoice, I/We consent to the transfer of funding from out budget into the Hospitality Center. I understand that obtaining the CFO, Supervisor and/or Principal Investigator’s signature does not guarantee reservations and that all reservation requests are not fully approved until the Catering Coordinator or delegation signs the agreement. I also acknowledge that our budget will not be refunded or credited, fi the scheduled reservation is cancelled or postponed.

Requestor’s Signature Date Dept. Head/Supervisor/PI’s Signature Date Chief Financial Officer’s Signature Date

**METHOD 2: Non-NTU Customers Only**

I understand that all stays must be approved by the Catering Coordinator and payment must be made in full before the date(s) is confirmed. I also acknowledge that all transactions are final and NO REFUNDS will be given, if the reservation is cancelled or postponed.

Customer’s Name (Print) Customer’s Signature Date

The following are acceptable methods of payment:

|  |  |  |  |
| --- | --- | --- | --- |
| **Method of Payment** | **Amount Received** | **Date Received** | **Receipt/Transaction Number** |
| Cash |  |  |  |
| Money Order |  |  |  |
| Credit Card\* |  |  |  |

\*Credit Card Transactions must be done through the NTU Finance Office located in the Empowerment Building

Navajo Technical University, hereinafter referred to as a Lessor, reserves the right to affect change, including termination of this Facility Usage

Agreement. The Lessee agrees to indemnify and holds harmless against all claims, losses or liabilities the use of the Lessor’s Facilities arising from, but not limited to, the actions and/or activities during the time specified. The campus is a drug, alcohol and smoke free campus. No open flames and equipment are allowed in the facility and kitchen is not available for usage. In addition, the facility cannot be used for fundraising events, except NTU student organizations. The Hospitality Facility must be in the same condition in which the Lessor leased it. The facility includes all NTU property, campus landscape, exterior and interior building structure, furniture, hotel keys and other equipment. If there are any damages or lost items, the Lessee will be held legally liable for all fees incurred to the repair damages and will no longer be allowed to rent from the facility. If at any time the Lessee violates any of the listed policies or other policies of the Lessor, the Lessee will be escorted off campus and banned from future usage. If there is sufficient evidence as determined by the Navajo Nation Law Enforcement, the Lessee could also receive a citation and/or fine(s) from the Navajo Nation. I hereby agree to all NTU terms and conditions.

Customer’s Name (Print) Customer’s Signature Date

|  |  |  |  |
| --- | --- | --- | --- |
| **Facility** | **Rate/day** | **Number of Days** | **Sub-Total** |
| Conference Room |  |  |  |
| **INVOICE #:** |  | **TOTAL:** |  |