Westside Development Center

Usage Request Form

What services do you provide?

Notice for all Requests

While the purpose and vision of the Westside Development Center is to offer a wide variety of development opportunities for nonprofits and the community, we recognize that the general public also has a need for a central location for special events. This may include a limited number of social events scheduled per year. Please note that developmental and training programs will be given priority booking consideration. By signing this request form, I acknowledge that I have read the full policies and restrictions of the Westside Development Center and understand them.

Signature:

_____Date:_____

Processing Your Request

Once your event has been reserved in our system, we will send a User Agreement Contract.

To confirm the reservation:

- Review the **User Agreement Contract** and confirm that all details are correct. If you have any changes, please call the YMCA of Southeast Texas Westside Development Center immediately**.** If the User Agreement Contract is not received within three (3) business days your meeting will automatically cancel.
- Enclose a deposit check made payable to: YMCA of Southeast Texas. The YMCA accepts checks and money orders.
- **Sign the copy of the User Agreement Contract. Make a copy for your records. Your signature on the contract verifies that the reservation is correct and that you have read and agree to abide by the YMCA of Southeast Texas Westside Development Center Policies & Procedures.**
- Return the signed User Agreement Contract, copy of 501c3 or EIN document, and $100 deposit.
- It is necessary to have all required documentation (501c3 or EIN, deposit and fees) a minimum of **ten (10)** business days prior to your scheduled event, or your reservation may be canceled.
- Please note if you cancel your meeting and fail to notify the YMCA of Southeast Texas Westside Development Center you will forfeit your deposit.

YMCA of Southeast Texas
Westside Development Center
601-A Rev. Dr. Ransom Howard Street
Port Arthur, TX 77640
www.ymcasetx.org

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Please print

NAME
LESSEE REPRESENTATIVE AT EVENT
ORGANIZATION NAME
TAX ID OR EIN NUMBER
ADDRESS
CITY STATE
PHONE
ALTERNATE PHONE
NAME OF EVENT

Type of Request

Please list date(s) and times

Room	Date Not to exceed 3 months	Start Time	End Time	Total Hours	Total
Deposit For office use only					$100.00
Meeting Room with Kitchen					
Meeting Room					
Temporary Office					
TOTAL					

Start time and end time will include set up and clean up time.

Fax Completed Form to 409.984-9915 or email to gtrainer@ymcasetx.org

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Details of Event

Please share what you are planning and how it will help develop and service the Port Arthur Community (if applicable)

What is your target audience? (Nonprofits, organizations, individuals, open to the public)

Organization Information (if applicable)

What are your geographical boundaries of service?

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