



Summer Camp/Conference Request

Availability: Last Week in May – July 31

Please complete this request for NMSU’s Housing, Meals, and other services. After submittal, an NMSU Conference and Catering Event Planner will contact you about availability and next steps to secure services. Note: A 20% deposit is due at signing of contract.

Name of Group: _____

Purpose of Camp/Conference: _____

Youth ____ Adult ____ or Both ____

Main Contact Name for Facility Agreement/Title _____

Address _____

Phone _____ Email _____

On-Site Contact Name/Title:

Phone _____ Email _____

Housing Information: Check-in times **must** be confirmed in advance during a **2-hour time frame**. Check-out is no later than 12pm (noon). *Note: **Residence Halls** accommodate Double Occupancy (4 guests per suite with a shared bathroom) and Single Occupancy (2 guests per suite with a shared bathroom). **Apartments** accommodate Double Occupancy with a shared bathroom and kitchen.*

Staff

Check-in Date _____ Check-in Times _____

Check-out Date _____ Check-out Times _____

Double Occupancy Males _____ Single Occupancy Males _____

Double Occupancy Females _____ Double Occupancy Females _____

Early Arrivals

Check-in Date _____ Check-in Times _____

Check-out Date _____ Check-out Times _____

Double Occupancy Males _____ Single Occupancy Males _____

Double Occupancy Females _____ Double Occupancy Females _____

Group

Check-in Date _____ Check-in Times _____

Check-out Date _____ Check-out Times _____

Double Occupancy Males _____ Single Occupancy Males _____

Double Occupancy Females _____ Double Occupancy Females _____



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Linen is available at an additional charge (includes pillow, pillow case, bedspread, two sheets, bath towel and washcloth):

No. of Linen Packages _____ No. of Replacement Packages (available for pickup every 7 days) _____

Special Requests (curfews, accessibility, gender separation, etc.):

Taos Dining - Breakfast, Lunch, Dinner:

Weekday Hours of Operation: 7:30am – 9am, 11am – 2pm, 4:30pm – 6:30pm

Special Time Request _____

Weekend Hours Request _____

First Meal _____ Date _____ No. of Guests _____

Breakfast Dates _____ No. of Guests _____

Lunch Dates _____ No. of Guests _____

Dinner Date _____ No. of Guests _____

Last Meal _____ Date _____ No. of Guests _____

Catering, Meals To-Go, Other – please specify:

Parking Passes: \$2.50 per week/per vehicle. Indicate No. of Passes _____

Activity Center Passes: \$30 per week/per person. Indicate No. of Passes _____

Internet Access: Instructions to connect to Aggie Guest will be available in guest rooms.

Insurance is required for all external groups (not sponsored by NMSU). Please indicate insurance policy: _____

Comments/Other Requests:
