

MWR THEATER REQUEST

STEP 1: APPLICATION

Email completed application to georgiann.l.hill.naf@us.navy.mil

Command: _____ Requested by: _____ Date: _____

Work Phone: _____ POC: _____

Work E-mail: _____ Function: _____ Size of Group: _____

Event date: _____ Start Time: _____ End Time: _____

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2. I accept full and complete responsibility for use of the MWR Theater and will ensure all requirements for release of responsibility have been met.

Signature

Signature of Program Manager if applicant is a reservist

STEP 2: ACCEPTANCE OF CONDITIONS (READ AND INITIAL)

____ For any equipment not found in theater e.g. chairs, bell, bullets, red carpet the user will make their own arrangements

____ For use of PA projector, user will make his own arrangements with **Ground Electronics x7842**

____ User must check status of AC prior to use and contact Public Works at x6380 / 6330 if the unit is not cooling.

____ User will pick up and return key to the MWR Admin office, BLDG 1525 RM 204A

____ I understand that if anyone from my command uses or goes behind the Theater concession area, this could impact future use of the facility.

STEP 3: AGREEMENT TO CLEAN UP

I authorize the above named person to use the MWR Theater. I WILL ensure that the MWR Theater will be cleaned after use in accordance with the checklist shown below. I understand that failure to comply with these requirements will result in denial of future use of the MWR Theater.

Printed Name: _____ Signature: _____

(This section must be signed by the Department Head of the individual reserving the Theater)

STEP 4: CONFIRMATION

1. Your request for the MWR Theater has been ☐ APPROVED ☐ DISAPPROVED

Reason: _____ Signature _____

STEP 5: VERIFICATION OF CLEANUP

1. The following checklist will be completed by requester upon conclusion of the function and this worksheet will be left at the Movie Reel BLDG 1845.

____ Yes ____ No Building has been swept
____ Yes ____ No All trash has been properly disposed of
____ Yes ____ No All PA system components have been stowed properly
____ Yes ____ No Key turned back into the MWR Admin Office
____ Yes ____ No Restrooms stocked and cleaned

I have ensured all qualifications have been met Signature _____

MWR Representative Signature _____

