

JACKSON BARRACKS MUSEUM AND RECREATION CENTER
6400 St Claude Ave
Jackson Barracks
New Orleans, LA 70117

APPLICATION FOR MUSEUM AND RECREATION CENTER FACILITIES

Please complete all the information on this form and return to the Post Headquarters. Jackson Barracks will only rent facilities upon review and approval of this application. All applications will be reviewed on a first come basis for particular rental dates and times.

Function Date _____ Type of Function _____

Day of week (circle one) Sunday, Monday, Tuesday, Wednesday, Thursday, Friday, Saturday

Requested Hours _____
Beginning Ending

Sponsor Name _____

Address _____

Home Telephone # _____ Work Telephone # _____

Cell # _____ e-mail address _____

FACILITIES REQUESTED

Museum _____

Recreation Center _____

Alcohol (circle one) Yes No

Make sure that you have read and understand the Rental policy guidelines

Attach of copy of the proposed facility set up

I have completed this application/agreement and I have read, understood, and agree to the rental policy which is incorporated herein by reference.

Applicant signature

Date