

NORTH BALTIMORE OHIO AREA HISTORICAL SOCIETY, INC.

APPLICATION FOR USE OF THE FACILITIES

Refer to the NBOAHS Use of Facilities Policy before requesting to use the facility.

Name of organization: _____

Name of person requesting use: _____

Address: _____ Phone: _____

E-mail: _____

Purpose of the use of the facilities: _____

Anticipated number of attendees: _____

Date of the event: _____

Hours of use (including set up and clean up): _____

A \$25 nonrefundable deposit must accompany this form. The deposit will be applied to the first two hours of use. Any remaining fees must be paid to the NBOAHS member on duty at the conclusion of the event.

I have read the NBOAHS Use of Facilities Policy and I agree to see that my group observes all the policies.

Signature: _____ Date: _____

For NBOAHS use

Received by: _____ Date: _____

Deposit Received by: _____ Date: _____

Member assigned: _____

Date applicant contacted with approval: _____

Approved: 08-04-11