MADISON COUNTY, MISSISSIPPI

RESERVATION APPLICATION FOR USE OF COUNTY BUILDING AND/OR GROUNDS

Today's Date: //o 8 /15
Name and phone number of contact person for this request:
Ede Walter Veals
Nature of Meeting and/or Program: DAN Son County BBO
Nature of Meeting and/or Program: Som County 13BQ enfice public; fund resource content;
Request is for: (Courthouse Square, Courthouse, Gazebo, or Board of Supervisor's Board Room) (Please circle one)
Date Requesting: 6/13/15 Time: 6 Am -6/n(a.m.) (p.m.)
CONDITIONS: 1. Reservations must be made in the Board of Supervisors' office. 2. Reservations should be made one month in advance. 3. Free use of a facility or grounds shall be limited to governmental entities, and Madison County civic groups. 4. All Madison County businesses, and individual residents of the county must submit a \$25.00 non-refundable deposit at the time of making reservations, and the nature of the meeting must be for non-profit only. {Excluding the Canton Flea Market} 5. The facility or grounds must be cleaned to the satisfaction of the county. 6. Use of a building or grounds shall be limited to no later that 11:00 p.m. {Excluding the Relay for Life} 7. No smoking, alcoholic beverages or dances will be allowed. Any activity which would possibly damage floors, walls, ceilings, or lights is forbidden. 8. Any damages will be the responsibility of the reserving party. 9. Indemnification that the county will be held harmless under all conditions. Name: Reader Refree Temple {print name} Address: 375 magen Rd Nor face Prof. The Canton Prof. The Pro
I hereby agree to the above conditions of this agreement and have tendered the \$25.00 deposit. {Cash} {Check}

Signature: E/te-wasten no g/s

Note: If utility service is needed please call Canton Municipal Utilities at 855-5480, 48 hours in advance of your reservation date. A \$25.00 deposit is required during normal working hours. A \$50.00 deposit will be required after working hours, week-end or holidays.

MADISON COUNTY, MISSISSIPPI

RESERVATION APPLICATION FOR USE OF COUNTY BUILDING AND/OR GROUNDS

, ,
Today's Date:
Name and phone number of contact person for this request Austine Math
Conton's Community Guar oness Coasdinates 601-95
Nature of Meeting and/or Program: Joy De Mastin Littles Kinen
program open to public
Request is for: (Courthouse Square, Courthouse, Gazebo, or Board of Supervisor's Board Room) (Please circle one)
Date Requesting: January 195015 Time: 8'10 -100(a.m.) (p.m.)
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of the resource of the responsibility of the resource
9. Indemnification that the county will be held harmless under all conditions.
Name: HWS + ne Matts {print name}
Address: My Hall
M A CM
Canton, 1/1
m1 1 10/-9×11/7/19
Telephone: $20/-954-74/8$
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I hereby agree to the above conditions of this agreement and have tendered the \$25.00 deposit. {Cash} {Check}
acposit. Cash Johecks

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Signature: