MADISON COUNTY BOARD OF SUPERVISORS

Rogers Park Rental Application

Please submit completed application along with a Park rental fee of \$25.00 (make checks or money
orders payable to Madison County).
Name of Organization/Individual Johnica Brent
Type of Event Birthday Party Event Date 3.29-15
Start Time D. M. End Time D. O. D. D
Contact Name JONNICA Brent Cell phone # 1001-383-2880
Contact Address(street,city,zip) 390 RICKS Nr. Apt H3
Alternate Contact Peangelo / UCKES Alternate Cell # 601-832-248
RULES AND REGULATIONS:
1. Reservations must be made in the Board of Supervisor's office
2. Reservations should be made one month in advance
3. The grounds must be cleaned after the event to the satisfaction of Madison County
4. Use of grounds shall be prohibited after 11:00 p.m.
5. No smoking, alcoholic beverages or dances will be allowed. Any activity which would
possibly damage the grounds or equipment is prohibited
6. Any damages will be the responsibility of the reserving party
7. Indemnification that the county will be held harmless under all conditions
Is Electrical power needed? YesNo(\$50.00 additional utility charge)
Will portable toilets be used? YesNo(\$100.00 per day additional fee) *Portable toilets will be available daily from 8:00 am until 6:00 pm
I understand the \$100.00 portable toilet rental fee is non-refundable (initial please)
I have received a copy of the rules and regulations that govern the use of Madison County, Rogers
Park. Your signature below verifies that the information provided in the application is accurate and
complete and that you understand and agree to comply with the rules, conditions and regulations
contained in this rental application.
Contained in this rental application.
Signature: Muca Buly Date 3.20.15
*For additional information please call 601-855-5500

RECEI	PI DATE 4/20/2000	No. 6997
RECEIVED FROM	nouca Brent	\$ 7500
(60) 18 1- 286		
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Rogers Park Rental Application

Please submit completed application along with a Park rental fee of \$25.00 (make checks or money orders payable to Madison County).

Name of Organization/Individual Thompson Family Reunion
Type of Event <u>Family Reunien</u> Event Date <u>July</u> 25, 2015
Request: Front of Park (Circle One Please)
Start TimeEnd TimeEnd
Contact Name Tameka Mann Cell phone # 7109-257-1034
Contact Address(street, city, zip) 3718 N Liberty St Canton, MS 39046
Alternate Contact Sharon wilkes Alternate Cell # 1001 664-8267
RULES AND REGULATIONS:
 Reservations must be made in the Board of Supervisor's office Reservations should be made one month in advance The grounds must be cleaned after the event to the satisfaction of Madison County Use of grounds shall be prohibited after 11:00 p.m. No smoking, alcoholic beverages or dances will be allowed. Any activity which would possibly damage the grounds or equipment is prohibited Any damages will be the responsibility of the reserving party Indemnification that the county will be held harmless under all conditions
Will portable toilets be used? YesNo(\$100.00 per day additional fee) If so, Call McGraw "Gotta Go" Portable Toilets; Phone- 601.879.3969
Sw I understand I am reponsible for the portable toilets (initial please)
I have received a copy of the rules and regulations that govern the use of Madison County, Rogers Park. Your signature below verifies that the information provided in the application is accurate and complete and that you understand and agree to comply with the rules, conditions and regulations contained in this rental application.
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*For additional information please call 601-855-5500

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DOLLARS	L988-1-	RECEIVED FROM_

Paid \$75

Rogers Park Rental Application

Please submit completed application along with a Park rental fee of \$25.00 (make checks or money orders payable to Madison County)
Name of Organization/Individual Halfsher Travis
Type of Event Dirthday Party Event Date 4515
Request: Front of Park (Circle One Please)
Start Time 3.00 p.m. End Time 10:00 p.m.
Call whoma # 1001 = 260-895
Contact Address(street,city,zip) 434 N. Conal St. Conton, WS. 39846
Contact Name Kulls New Journal St. Contact Address(street, city, zip) 434 N. Conal St. Contact Address(street, city, zip) 434 N. Conal St. Contact Market Contact Tinisha Social Market Cell # Loo 1 - 540 - 8108
RULES AND REGULATIONS:
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Signature: Date 3 36 15 *For additional information please call 601-855-5500

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RECEIP	DATE 3	19/12015	No. (3900)3
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BAL. DUE	OCREDIT BY	Clara of	alda

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