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 Turning Point Arts & Entertainment Sta
Name of Organization/Individual Turning Point Ats & Entertainment Start Type of Event Blessing Conton Week Event Date 9/26 - 19/2
Request: Front of Park Back of Park (C (Select One Please) Safurday, Sept. 26@8:00 am Safurday, 1:00 pm + 10:00 Start Time San Friday 7:00 pm End Time Sun - Friday 10:00 pm
Contact Name Kathy Amos Cell phone # 601-594-2330
Contact Address(street, city, zip) 231 W. Peace St. Canton, MS
Alternate Contact Joe R. Amus Alternate Cell # 601-594 - 2330
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
Is Electrical power needed? YesNo(\$50.00 additional utility charge)
Will portable toilets be used? YesNo(\$100.00 per day additional fee) If so, Call McGraw "Gotta Go" Portable Toilets; Phone- 601.879.3969
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.
Signature: Date B/13/15 *For additional information please call 601-855-5500
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And the second second	TURNING POINT FELLOWSHIP MINISTRIES INTERNATIONAL CHURCH PO BOX 727 CANTON MS 39046 8/13/15	1058 85-129/842
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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 T. Hany Shavers
Type of Event Birth day Party Event Date 309. 5, 2015
Request: Front of Park Back of Park (C (Select One Please)
Start Time 2 00 End Time 6.30
Contact Name Tiffeny Showers Cell phone # 601-506-9269 Contact Address(street, city, zip) 619 Mortin Luther King Apt HU
Contact Address(street, city, zip) 614 Mortin Luther King Apt HU
Alternate Contact July Van Buren Alternate Cell # 601-963-3763
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 Is Electrical power needed? YesNo(\$50.00 additional utility charge) Will portable toilets be used? YesNo(\$100.00 per day additional fee)
If so, Call McGraw "Gotta Go" Portable Toilets; Phone- 601.879.3969
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*For additional information please call 601-855-5500

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orders payable to Madison County).
Name of Organization/Individual Werty BAPTST Church
Type of Event Date 10/10/2015
Request: Front of Park Back of Park (C (Select One Please)
Start Time 8 PM End Time 5 PM
Contact Name ROSCOE JONES Cell physics # 601 940-1820
Contact Address(street_city_zip) 491 Swith - Clw Rd
Alternate Contact Welly Jones Alternate Cell # (601) 859-1005
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 Is Electrical power needed? Yes No (\$50.00 additional utility charge) Will portable toilets be used? Yes No (\$100.00 per day additional fee) If so, Call McGraw "Gotta Go" Portable Toilets; Phone- 601.879.3969
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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 MARLD T. ANDERSON
Type of Event Family Gathering Event Date 9-6-15
Request: Front of Park Back of Park (C (Select One Please)
Start Time 3:00 pm End Time 9:00 pm
Contact Name MARLO T. Anderson Cell phone # 769-257-2748
Contact Address(street, city, zip) 115 Dogwood Dr. CANTIN, MS
Start Time 3:00 pm End Time 9:00 pm Contact Name MARLO T. Anderson Cell phone # 769-257-2748 Contact Address(street,city,zip) 115 Dogwood Dr. CANTIN, MS Alternate Contact TARA Anderson Alternate Cell # 769-257-2950
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
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. Signature: Date 9-1-15
Signature:Date

REC	IEIPIC DATE	9/1/2015	No. 697624
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