

APPLICATION FOR USE OF MORRIS LYNCH CENTER
TOWN OF HAMILTON, NC.

ORGANIZATION MAKING REQUEST: _____

ADDRESS: _____

TELEPHONE#: _____ FEDERAL ID#: _____

PERSON RESPONSIBLE: _____

ADDRESS: _____

TELEPHONE#: _____ SS#: _____

DRIVER'S LICENSE#: _____

DATE OF EVENT: _____ TIME OF EVENT: _____

NATURE OF EVENT: _____

ESTIMATED NUMBER OF PEOPLE: _____

I HAVE READ AND WILL COMPLY WITH THE RULES AND GUIDELINES FOR USING THE
MORRIS LYNCH COMMUNITY BUILDING AND GROUNDS.

SIGN/DATE: _____

MAKE CHECKS PAYABLE TO: TOWN OF HAMILTON

RENTER: _____ DATE: _____

CHECK#: _____ CHECK AMOUNT: _____

IF YOU HAVE ANY QUESTIONS ABOUT THE BUILDING OR ARRANGEMENTS, CALL
ANNIE B. JONES/TOWN CLERK AT 252-798-2001 BETWEEN THE HOURS OF 8:00 AM AND
5:00 PM.