

USE OF SPACE REQUEST

Name of Organization: _____

Organization Mailing Address: _____

501c3 _____ 501c4 _____ Government Agency School Social Group
(Please circle the kind of organization. Please include your 501c # _____)

How many members does your group currently have? _____

Briefly describe your organizational mission and/or the purpose of your group/club/service agency:

Contact person: _____ Title: _____

Mailing Address: _____

Phone Number: _____

Email Address (es): Add as many as you like. This is a great way to communicate our newsletters and to share information about each other's groups.

Fundraising Interests (Tell about your groups fundraising interests. Ie: Food concession, raffles, etc. This will help us and other groups when opportunities become available to either fill a void and to be sure that services do not duplicate.)

Space requested (please circle one):

HALL /HOLDS 120 PEOPLE

RC ROOM / HOLDS 35 PEOPLE (1st floor)

***COMMUNITY HOUSE MTG. ROOM / HOLDS 12-15 PEOPLE (2nd floor)**

***MIND, BODY, SPIRIT ROOM (2nd floor)**

ELMMCC Front Lawn

ELMMCC Back Lawn

The community hall and Ruth Coffin Room are most frequently used for activities, functions and parties. Please keep food limited to those areas. Thank you.

*Meeting space only.

There is a minimum donation of \$25.00 per use is required to cover janitorial expenses.

Day Requested: _____ Time: _____ AM / PM

Please list *specific dates* your group wishes to meet at the ELMMCC in the spaces below

Sept. _____

Jan. _____

June _____

Oct. _____

Feb. _____

July _____

Nov. _____

March _____

Aug. _____

Dec. _____

April _____

May _____