

FACILITIES USAGE REQUEST FORM

Date of Request: ___/___/___

Requester: _____

Address: _____

Name of
Activity _____

Day/Date(s)
Needed: _____

Requester Signature: _____ Date: ___/___/___

ZMHA Employee Signature: _____ Date: ___/___/___

ZMHA use only "for additional
instructions": _____

INVOICE

Amount Due: _____ Date Due: ___/___/___

Date payment received: ___/___/___ By: _____

I have read ZMHA's rules & utilization policy for the use of the James D. Singer Activity Center and agree to abide to all policies.

Signature: _____ Date: ___/___/___