

**Cornfields Chapter
Facility Usage Request Form**

Receipt NO# _____

Name: _____ Organization/Family: _____

Address: _____ Date of usage: ____/____/____
Time: _____ to _____

Contact Number: _____ Is this a for-profit organization? YES or NO

Reason for usage: _____

THE REQUESTING PARTY AGREES TO THE FOLLOWING CONDITIONS:

1. The chapter facility will be left in the same condition. No equipment/property is to be taken. If the kitchen is being used, it has to be cleaned after use.

FACILITY USAGE CATEGORIES:

- A. Family gathering for funeral/funeral reception.....Fee waived
- B. Chapter use for OUTSIDE organization.....Fee waived
- C. District/Agency Council/IRS Tribal Entities.....Fee Waived
- D. Fundraiser, reception, family parties, etc.....\$100.00 plus 6% tax
with use of kitchen.....\$50.00 plus 6% tax

**Cash or money order must be made payable to Cornfields Chapter,
reservation of facility will not be made until full payment is received.**

I, _____ am responsible for obtaining liability insurance; and for any damages, loss of chapter equipment, tools and property. The

Cornfields Chapter officials and staff will not be responsible for any injuries, loss items or accidents. I will keep all children on the premises under control. **Kitchen usage will be limited to only four (4) people with food handler's card.** Chapter facility must be cleaned after usage and all decorations must be taken down.

1. _____ I have read and understand the conditions and agree to abide by it.
2. _____ Conditions have been explained to me in the Navajo Language.

_____ / ____/____
Renter Signature Date

◆ FOR CORNFIELDS CHAPTER ADMINISTRATION, ONLY ◆

I have checked the above applicant as category _____. Applicant shows payment proof of cash or money order.

_____ / ____/____
Signature of Office Staff Date Time

ACKNOWLEDGED

_____ / ____/____
Signature, Chapter Manager Date Time