



BUILDING USE APPLICATION

Required Date: _____ From time: _____ To time: _____

Requester's Name: _____ Phone: _____

Address: _____ Email: _____

ICLI Member? _____

Will the requester be the point of contact the day of the event? If no, please enter point person's info:

Name: _____ Relationship: _____ Phone: _____

Specify the event and number of guests expected: _____

If having a nikkah, please specify the name and phone number of Imam who is officiating:

Enter the names and phone numbers of all individuals and/or businesses that will provide services in the above mentioned event:

Name	Phone
_____	_____
_____	_____

Is the event for a non-profit organization? _____

If yes, enter the name and address of the organization:

Name: _____ Phone: _____

Address: _____

Will food or refreshments be served in the event? _____

Mark the required areas:

- | | | | | | |
|--------------------|-------|------------------|-------|---------|-------|
| Masjid/lower level | _____ | Basketball Court | _____ | Kitchen | _____ |
| Masjid/prayer area | _____ | Courtyard | _____ | | |

