MILES COLLEGE RENTAL OF COLLEGE FACILITIES

Organization				
Address				
Phone #				
Contact Person		Phone #	Phone #	
Type of Event				
Date of Event	# of Days	Time Requested	To	
Facilities Requested: ((((((((((((((((((() Student Union (Top Level)) Cafeteria) Auditorium) Grounds) Dormitory) Other)		
Charges:				
Facilities	\$			
Security	\$	Per Guard		
Janitor	\$			
Other	\$			
Total	\$			
Approval:				
Dean of S	Students	Chaplain	Academic Dean	
Approved: Business Affai	rs Da	ate Accepted	Date	
	Offi	ce Use Only		
Deposit \$		Balance Due \$ _		
Date of Deposit				
Receipt #		Receipt #		

NOTE: Balance of Deposit is Due Seven (7) Days Prior to Event