



Cumberland Community Foundation, Inc.

308 Green Street • P.O. Box 2345 • Fayetteville, NC 28302
Phone: (910) 483-4449 • Fax: (910) 483-2905 • www.cumberlandcf.org

APPLICATION FOR USE OF THE COMMUNITY MEETING ROOM

Name of Group / Organization _____

Is organization non-profit? _____ 501(c) (3)? _____

Tax Identification # _____

Name of person applying on behalf of group _____

Mailing Address _____

Home Telephone _____ Work Telephone _____

Email Address _____ Fax _____

Second Contact Person _____

Mailing Address _____

Home Telephone _____ Work Telephone _____

Email Address _____ Fax _____

Type of activity/meeting _____

Will you be using the kitchenette? _____ If yes, briefly describe activities planned involving the kitchenette _____

Expected Attendance _____

The applicant has read and understands the Foundation's Rules and Regulations on the use of the Community Room, and assumes full responsibility on behalf of his/her organization.

Yes _____ No _____

The fee for the use of the community room must be paid at the time the reservation is made. The fee is \$20.00 per hour (\$10.00 per hour if paid 6 months in advance).

No refunds will be given.

Signature of Applicant

Print Name

Date