

FACILITY USE APPLICATION

MUSLIM COMMUNITY CENTER – EAST BAY

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Name Main Contact Home Address: Main Contact E-Mail Address: ALTERNATE CONTACT NAME (optional): Alternate Contact E-Mail Address: POLICIES AND PROCEDURES: Please read the entire Esubmitting this application. I have read and understand the MC		
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	CC's policies listed in the guide Please initial	
RENTAL INFORMATION:		
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Event Date:	Alternate Event Date:	
Set-up Time: Event Start Time: I	Event End Time: Clean-up Time:	
Type of Event:	Approx. # in Attendance:	
Event Description:		
Select Area(s) you wish to	o use.	
Prayer Hall Conference Room Banquet Hall	Picnic Area	
EQUIPMENT REQUESTS: Tables, chairs and screens a		
available for a nominal fee. Please select the additional ite	ems for your event.	
Privacy Additional Stage & Babysit	tting Video	
barrier buffet line Podium	recording	
	Caterer Phone:	
Name of Caterer:		
Please describe decorations or additional requests or requirements:		