



# Islamic Center of Mississippi

## Mosque Key Checkout Form

<b>Your Name (please print):</b>	
<b>E-mail Address:</b>	
<b>Phone Number:</b>	
<p>I agree to neither duplicate nor distribute any of these keys, and I agree to return all keys to ICM upon request. I also understand that I am responsible for the cost of having the locks re-keyed and replacing the keys of others who can use these locks if I lose any of these keys.</p> <p>X_____ (Sign)</p>	

	Key #	Checkout Date	Return Date
Key 1			
Key 2			