

ISLAMIC CENTER OF VIRGINIA 1241 Buford Road North Chesterfield, Va. 23235 Tel: 804-320-7333

Activity Request FORM

| Name: | | | | | |
|--|---|---|----------------|------------|--------------------|
| Address: Telephone: Type of Activity: | | | | | |
| | | | Date: | Time | e:AM(10AM-12 Noon) |
| | | | PM(12 N -10 PM | I : | |
| Activity includes Hall: Yes or No. Tables: Yes or No. Chairs: Yes or No. Kitchen: with or withou | | | | | |
| Hall must be used Do not use Wome Napkins, plates, j Kitchen applianc All tables and cha All trash must be All surfaces must | ndividual is responsible for the followidual is responsible for the following the purpose it was reserved en's prayer hall. Diastic forks, knives, etc. you are es can be used for warming food airs must be stacked and placed removed and placed in trash collobe cleaned | d for. e the responsibility. d. No cooking. as found | | | |
| I have read and agree to | • | | | | |
| Name: | Signature: | Date: | | | |
| Approved by ICVA Exe | cutive Member | | | | |
| Name: | . | | | | |