

THE UNITARIAN FELLOWSHIP OF NORTHWEST TORONTO
55 St. Phillips Road, Etobicoke, Ontario, M9P 2N8
416-249-8769 ufnwt@bellnet.ca

CONTRACT

(Request for use of Space)

Group's Name: _____

Contact Person: _____

Person Responsible: _____ (Printed Name)

_____ (Mailing address)

_____ (Email address)

_____ (Home Phone) _____ (Work/Cell)

Type of Function: _____

(Wedding, Conference, Meeting, Club, etc.)

Room(s) Required: Assembly Rm____, Board Rm____, Lounge____, Welcome Rm____, Kitchen____

Required Appliances to be used in kitchen: Fridge____, Stove____, Oven____, Microwave____,
Dishwasher____, Additional electrical equipment (e.g. amplifier)_____

Alcohol in use: Y____ N____ Person applying for liquor licence _____

Number of People Attending: _____

Period of Use: frequency _____

months required _____

day of the week _____

time of day _____

Fee for use: _____

Approved by: _____ (Property Chair)

_____ (Signature of Group Contact)

_____ (Board Chair)

_____ (Date)

Please complete in duplicate and return 1 copy to Northwest Fellowship, attn. Dee Ho-A-Shoo

Person responsible for checking Fellowship House _____