



# JAIN SOCIETY OF METROPOLITAN WASHINGTON

A non-profit tax-exempt religious organization, ID# 54-1139623

4241 Ammendale Road, Beltsville MD 20705

Mailing Address: P.O. Box 4548, Silver Spring MD 20914 | [www.JSMW.org](http://www.JSMW.org)

## Application for Renting Chairs & Tables for Private Event

*A complete application must be sent to the Director of Facilities via email to: [Facility@JainSocietyDC.org](mailto:Facility@JainSocietyDC.org), minimum two weeks prior to the event date. Please complete and submit. Recommended to use Adobe Acrobat*

**Today's Date:** \_\_\_\_\_

**Member's First Name:** \_\_\_\_\_

**Member's Last Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Mobile Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Pick Up Date and Time:** \_\_\_\_\_ **Return Date & Time:** \_\_\_\_\_

Item	Quantity	Amount (Per)	TOTAL
Chair	_____	\$3.00	_____
Table	_____	\$8.00	_____
Misc Items (ask for cost)	_____		_____
Additional Donation	_____		_____
		<b>Grand Total:</b>	_____

If granted permission to rent, members must abide by the below rules and regulations:

1. Member must pay \$101 deposit towards renting chairs and/or tables at the time of pick-up.
2. Cost of damaged/lost item will be deducted from Deposit amount.
3. Member must pay rental amount as donation at the time of return.
4. Appointment must be made with Director of Facility 1 week prior to the actual pickup date.
5. All chairs and tables must be clean upon return.
6. Member will be responsible for paying full price of item if any chairs and/or tables is/are damaged or broken.

**Submission of application does not automatically give anyone permission of picking up the items. Permission will be granted on a first come first serve basis.**

I/We have read and fully understand the rules and regulations.

**Member's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Facility's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Pick-Up By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Return Received By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Notes:</b>  
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