

Waiver of Rental Fee Request Form

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ CELL NUMBER: \_\_\_\_\_

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RENTAL DATE: \_\_\_\_\_

PURPOSE: \_\_\_\_\_  
\_\_\_\_\_

REASON FOR WAIVER REQUEST: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, UNDERSTAND IF THE REQUEST FOR WAIVER IS APPROVED I AM STILL REQUIRED TO PAY THE CLEANING DEPOSIT OF \$15.00, WHICH WILL BE REFUNDED IF THE CHAPTER IS INSPECTED TO BE IN GOOD CONDITION FOLLOWING THE EVENT. I ALSO UNDERSTAND THAT THE WAIVER IS FOR THE RENTAL FEE ONLY, AND WILL BE RESPONSIBLE FOR ANY DAMAGES, THEFT, OR INJURY THAT MAY OCCUR DURING THE RENTAL PERIOD.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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ADMINISTRATION USE ONLY:

WAIVER APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

WAIVER DISAPPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

REASON FOR DISAPPROVAL OF WAIVER: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_