## APPLICATION TO USE THE KOREAN COMMUNITY CENTER

1809 Holister Rd. Houston, TX 77080

Applicant Contact Information				
Address	Address			
City, State Zip	City, State Zip			
Email	Phone No.			
	Intended Use Informatio	n		
Date	Time	From: To:		
Purpose				
Room	Use Fee			
# Persons	Food?	Yes / No		
Clean-up Deposit	Special Requests?			
Use Fee Waiver Requested? (May take up to 10 days for approval)		Yes / No		
Use by Economically Disadvantaged?		Yes / No		
Signature below means you accept the terms and Korean Community Center reserves the right to c				
Date	Position			
Print Name	Signature			

## APPLICANT - DO NOT FILL BELOW

RECEIPT			
Date		Amount Paid	
Received By		Signature	

Thank you for using the Korean Community Center.

Please ask attendant about making a contribution to KAACCH, a 501(c)3 non-profit organization.