

FAYAL TOWN HALL RENTAL APPLICATION
4375 SHADY LANE
EVELETH, MN 55734
218-744-2878

Date of Event _____ Type of Event _____

Applicant Information:

Name _____ Home/Cell Phone _____

Address _____ Work Phone _____

Rental Hours: Start Time _____ Ending Time _____

Residency: Is the applicant a resident of the Town of Fayal? _____ Yes _____ No

Applicant certifies a copy of the Town of Fayal Rental Policy has been provided. Applicant is fully responsible for the event and is subject to the terms and conditions of the Town of Fayal Hall Rental Policy.

Applicant's Signature _____ Date _____