## Request for Waiver of Rental Fees.

By completing this form you are requesting the waiver of rental fees for the West Elgin Recreation Centre, West Lorne Community Complex meeting room and Pavilions (Miller park and Port Glascow Trailer Park Pavilions) until December 31, 2021.

The booking process will remain the same. Facility User Contract will need to be signed. A Certificate of Insurance will need to be provided.

insurance will need to be provided.	
Organization Name *	
West Elgin Community Health Centre	
Representative's Name *	
Diane Arsenijevic	
Main method of Contact *	
C Phone Number	
Email Address	
Phone Number	
519-768-1715 ext 2224	
Email Address *	
dianea@wechc.on.ca	
Please select the facility you are requesting the waiver of usage fees.	
West Elgin Recreation Centre	
West Lorne Community Complex Meeting Room	
Miller Park Pavilion	
Port Glascow Trailer Park Pavilion	

Not for profit organization offering program to community fo	r free
Date of Requested Fee Waiver. Pleas	se state Multiple Rental Dates.
	21 - May 19, June 16, July 21, August 18,
Multiple Rental Dates	ptember 15 from 10:30-1:30
We hereby request a waiver of usage fees for the above We understand the booking process will remain the san Clicking this box you agree to the above statement and all	me. *
Date	
2020-12-18	

## OFFICE USE ONLY

Date	
	<b>#</b>
Council Approval	
Received	
Clerk Signature	