

THE UNIVERSITY OF THE WEST INDIES

MONA, JAMAICA, WEST INDIES

UNIVERSITY CHAPEL

CHAPEL RESERVATION FORM

This form is used for individuals/groups wishing to reserve a date in the Chapel Diary without any firm commitment.

Date: DD / MM / YYYY

I /We hereby apply to reserve a date at the University Chapel, Mona Campus for my /our event.

CLIENT INFORMATION

Individuals

Name of Applicant(s):	
Address:	
Phone:	
Email:	
Affiliation to The UWI (If applicable):	
Groups	
Name of Organization/Group:	
Address:	
Name of Authorized Representative:	
Position with Organization/Group:	
Phone:	
Email:	
Affiliation to The UWI (If applicable):	

The Registry, Secretariat – August 2020

EVENT DETAILS		
Event Type:		
Event Date:		
Projected Start Time:	Projected End Time:	
Number of Persons Expected:		
DECLARATION		
 a. For thirty (30) days for b. For fifteen (15) days for ii. No date reservation is usua iii. After the holding periods in 	non-refundable and reserves the events AT LEAST three (3) revents LESS THAN three (3 ally done for events less than edicated in part i above have passold the date in the Chapel Diary	nonths away. (i) months away. (ii) month away. (iii) month away. (iii) sed, an official application
Applicant's Full Name	Signature	Date
FOR OFFICIAL USE ONLY		
Fee Due:	Date Paid:	
Receipt No:		
Request Accepted by:	Date k/Assistant Registrar	e:
Reservation Expiry Date:		