

Facility Reservation Fee Waiver Application

Name: _____

Address: _____

Telephone: _____

Reasons for Facility Reservation Fee Waiver:

Under penalty of perjury, I declare that the information provided on this form is true and correct to the best of my knowledge, and that I am financially unable to pay the Facility Reservation Application Fee. I now request that this fee be waived.

NOTICE TO PERSONS REQUESTING FACILITY RESERVATION FEE WAIVER

A false or dishonest answer concerning your financial status will lead to the cancelation or revocation of your Facility Reservation and will impact your ability to obtain future Facility Reservations.

Further, a false or dishonest answer concerning your financial status could lead to prosecution for felony perjury. See G.S. 14-209.

This the ____ day of _____, 20__.

Name:

Sworn and subscribed before me this the ____ day of _____, 20__.

Notary Public

My commission expires: _____

[Notarial Seal]