



**HQB Fee Waiver Request Form**

Please fill out the information below on behalf of your Group/Organization to request that fees detailed below for this meeting/event be waived.

**Contact Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Group/Organization:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Activity/Event type (ex: meeting, party):** \_\_\_\_\_

**Event Time:** Day \_\_\_\_\_ Date \_\_\_\_\_ Start Time \_\_\_\_\_ End Time \_\_\_\_\_

I am requesting a:  **Full**  **Partial** waiving of fees.

For a partial fee waiver, please check the fees you are requesting waived:

- Room Setup
- Damage Deposit
- Room Rental
- Special Setup

**Reason for request:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Organization Verification:**

- Non-profit
- For-profit
- Individual
- Government
- Employee/HQB Partner

Date submitted: \_\_\_\_\_

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Approved  Denied

Approved by: \_\_\_\_\_  
Hallie Q. Brown Community Center.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Reason for request \_\_\_\_\_