

# 2019 Medinah Site Location Permission Form

The \_\_\_\_\_ of Medinah Temple has been given permission  
(Name of Unit/Committee/Shrine Club)  
 to use as an Onion Sales Site, the property known as :

Site Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

The property can be used on: (Please list all anticipated dates)

<u>DATE</u>	<u>FROM</u>	<u>UNTIL</u>	<u>DATE</u>	<u>FROM</u>	<u>UNTIL</u>
May __ 2019	_____ AM/PM	_____ AM/PM	May __, 2019	_____ AM/PM	_____ AM/PM
May __ 2019	_____ AM/PM	_____ AM/PM	May __, 2019	_____ AM/PM	_____ AM/PM
May __ 2019	_____ AM/PM	_____ AM/PM	May __, 2019	_____ AM/PM	_____ AM/PM
May __ 2019	_____ AM/PM	_____ AM/PM	May __, 2019	_____ AM/PM	_____ AM/PM

I hear by certify that I am the owner, or manage the above named property and am authorized to grant permission to use this property for Onion Sales on the above dates.

Signature of owner/manager: \_\_\_\_\_

Print Name of owner/manager: \_\_\_\_\_

Dated: \_\_\_\_\_

Phone number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Medinah Unit/Committee/Shrine Club Contact Person: \_\_\_\_\_

Cell #: \_\_\_\_\_ Home #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Form must be completed by: April 28, 2019

Return to: Medinah Shrine Center  
 550 Shriners Drive  
 Addison, IL 60101



SELLER'S NAME \_\_\_\_\_  
 SELLER'S PH \_\_\_\_\_  
 GROUP \_\_\_\_\_

PICK-UP DATES: May 8 to May 9, 2019

10 lb. Vidalia Onions - ONLY \$ \_\_\_\_\_

YOUR PICK-UP LOCATION IS \_\_\_\_\_

	NAME	ADDRESS	CITY	ST	ZIP	PHONE	EMAIL	QTY	\$ DUE	V PAID
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									<b>TOTALS</b>	

This order form is for your records and should be kept with your group's onion chairman

All proceeds benefit Medinah Shriners and are not tax deductible

Pre-orders must be in by March 31st