



210 North 7th Street, Canton, MO 63435

Canton Community Center Inc. BUSINESS INCUBATOR EXIT Form

573-288-0550

www.cantoncommunitycenter.com



www.facebook.com/cantonmocommunitycenter

Last Name		First Name		MI
Street Address		City	State	Zip Code
Primary/Cell/Home Phone	Work Phone	Member E-Mail (email address are not shared/sold)		

Please state the reason Exiting, be specific on reason of exiting, this can include success or failure of Business Incubator

Expected Outcome and/or Terms of Return

Agreement

The Canton Community Center is a building designed to provide facilities for educational and exercise classes, meetings, and social events. The Community Center was pleased to host your business, however brief, in our facility and we hope that your business had the opportunity to grow and the reason of Exit is a positive one, however if an issue did arise where it is required for the Business Incubator to vacate the premises. Revocation of permit for use can be issued by any Canton Community Center Employee, Director, or Board Member, in addition, the Canton Police Department. The above listed is why you were asked to vacate the premises, and the Expected Outcome and/or Terms of Return are final with only Board of Directors overturn (unless requested by Canton Police where they will also have an input on return) If you wish to object these findings please fill out a Complaint Form following all directions on that form.

Signature (s)

I have an understanding of this form and agree to the agreement section, IN WITNESS WHEREOF this Rental Dismissal Form has been executed by the undersigned parties on the date written below.

Member Signature	Date	Parent/Guardian Signature	Date
Center Representative	Date		

To be filled out by Director or Board of Directors

Additional information after the fact (i.e. reinstatement of Business Incubator, court response, overturn by Board of Directors etc)

Refund Amount	Method of Refund	Issuer of Refund Last Name	Issuer of Refund First Name	Authorized by and Position
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