



## Application to Attend Kairos Weekend Closing at MCI

Kairos Weekend Closing I am requesting to attend:

Weekend # \_\_\_\_\_ Sunday \_\_\_\_\_ (date)

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Daytime Phone Number: (    ) \_\_\_\_\_

Evening Phone Number: (    ) \_\_\_\_\_

e-mail, if applicable: \_\_\_\_\_

State Driver's License No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Sex: circle M    F

I will read and follow the "Guidelines for Prisons" that will be provided to me by a team member or posted on the Kairos web site ( [kairosohio.org](http://kairosohio.org) ) I understand this application will be checked by the Ohio Department of Criminal Justice for outstanding warrants in Ohio and the U.S.

\_\_\_\_\_  
Signature

***Important: Application must be in Chaplain's office 2 weeks prior to date of Weekend Closing.***

Mail completed application to:

Chaplain Murthy Kola  
Marion Correctional Institution  
P.O. Box 57  
Marion, Ohio 43301

Or FAX to -- (740) 387-8736

***You are approved to attend the closing unless informed otherwise.***

***Please arrive at the visitors reception desk by 4:30 P.M. for 5 P.M. closing.***