



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) 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.