

NON-CHURCH GROUP FACILITY USE REQUEST AND FOLLOW-UP

Please Print Clearly

EVENT INFO

Area/Rooms Requested: _____

Organization/Ministry Group: _____

Purpose of use: _____

Number of people expected: _____

Date and time requested: _____

Heat or Air Conditioning Hours and Dates: _____

Equipment requested (#of tables/chairs, sound,ovens, etc): _____

PERSONNEL

Person in charge: _____

Daytime phone: _____ Other phone: _____

Person in charge of clean-up & phone (if different than person in charge): _____

Please Read and Initial:

_____ I have received a copy of the guidelines and procedures and have read them. I am aware of my responsibilities for use of the facilities, and that it is my responsibility for the clean up of facilities requested.

_____ I will be contacted by a church representative to verify set up and clean up before the event.

_____ I will bring a refundable \$5 deposit when I pick up the key. Key will be returned promptly!

_____ A \$150 clean up deposit will be turned in to the church office two weeks prior to event.

_____ A donation of _____ to offset church expenses and building maintenance will be provided.
(suggestion of \$25/hour)

_____ A Certificate of Insurance for our group will be provided at least one week prior to event.

_____ There will be an additional fee of _____ if the church custodian sets up and/or cleans up (\$15/hour)

For Office Use Only:

Staff Approval by: _____ Date of approval: _____

Calendared by: _____ Date entered on calendar _____

Set-Up and Clean-Up costs: \$ _____ Deposit Received (date & initial) _____

Certificate of Ins. received(date) _____ Donation Received (date & initial) _____

Clean up Deposit Returned (amt/check#) _____ Key Returned (date & initial) _____

Clean up checked by: _____ Date checked _____