

## FACILITIES USE REQUEST FOR GRACE LUTHERAN CHURCH

Date submitted \_\_\_\_\_

Date requested \_\_\_\_\_

**PLEASE PRINT** and complete both sides.

Our facilities are here to honor the Lord Jesus Christ. Activities which do not, in our opinion, meet that criteria will not be approved. All requests are subject to change or cancellation as necessary to accommodate Grace Lutheran Church Events. Notice will be given and fees returned.

Room(s) requested: \_\_\_\_\_ Event time requested: \_\_\_\_\_

Number of people expected: \_\_\_\_\_ Age group(s) \_\_\_\_\_

One time event? YES NO      Recurring event? YES NO

Set-up/clean-up time requested by group \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

Is this request flexible? YES NO

Name of Group: \_\_\_\_\_ Responsible Person(s): \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Circle One:    Grace Lutheran Church Activity  
                   Grace member private event

Non-profit ministry supported by GLC  
 Outside non-profit group

Will a Grace member be present/ responsible at event? YES NO

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

Please describe the event or activity (Group Name, purpose, target audience)

\_\_\_\_\_

\_\_\_\_\_

Do you plan to serve food or refreshments? YES NO    Detail: \_\_\_\_\_

Do you request full use of the commercial kitchen? YES NO

Do you plan to serve alcohol? YES NO    *NOTE: Policy states no one under the age 21 may be present at the event if alcohol is served.*

CIRCLE requested materials & equipment: **(Requests must be made least 3 weeks prior to event date)**

TABLE(S): ROUND # \_\_\_\_\_ 6ft LONG # \_\_\_\_\_ 8ft LONG # \_\_\_\_\_ CHAIR(S) # \_\_\_\_\_ AISLE? YES NO

PIANO(Baldwin Brand)      FELLOWSHIP KITCHEN      STOVE/OVEN

TV(S) # \_\_\_\_\_      COFFEE URNS # \_\_\_\_\_      DISHWASHER

DVD PLAYER      KITCHENWARE (dishes, etc.)      OTHER (list)

MEDIA SUPPORT      MICROWAVE      \_\_\_\_\_

AUDIO/VIDEO SYSTEM      REFRIGERATOR      \_\_\_\_\_

MICROPHONE SYSTEM      SINKS

Special requests (i.e. set up time outside office hours? Requests will be considered, not guaranteed.)

\_\_\_\_\_

\_\_\_\_\_

### FOR OFFICE USE ONLY

Given to Parish Exec. Asst. for Approval on: \_\_\_\_\_ Approved? Y \_\_\_ N \_\_\_ Calendar Entry Complete \_\_\_\_\_

Deposit Required: Y \_\_\_ N \_\_\_ Paid date \_\_\_\_\_ Fees Required: Y \_\_\_ N \_\_\_ Paid date \_\_\_\_\_

No. of key/fob(s) provided \_\_\_\_\_ For room#(s) \_\_\_\_\_ To whom \_\_\_\_\_ Date \_\_\_\_\_

**FACILITIES USE AGREEMENT**

This Contract by and between Grace Evangelical Lutheran Church, hereinafter referred to as "GLC," and \_\_\_\_\_, hereinafter referred to as "USER," is for the use of certain GLC facilities more particularly described on the reverse. Please sign and return the original with your Estimated Use Fee of \_\_\_\_\_ no later than \_\_\_\_\_. If requested, a Certificate of Insurance naming GLC as "additional insured" must be received no later than three weeks prior to the event date. If there are any questions or if you have decided to cancel your reservation, please call the church office immediately or deposits may be withheld.

**AGREEMENT**

1. USER agrees to use GLC facilities for the purposes(s) stated on the reverse Facilities Use Request only, and to abide by all terms and conditions as set forth in the Facilities and Property Use Policy.
2. USER agrees to indemnify and hold GLC free and harmless from all liability, loss, damage, costs and all other claims or expenses asserted against GLC, which may arise from injuries/damage to persons or property occasioned by USER's use of facilities, whether for USER, their employees, volunteers, invited guests, general public or otherwise.
3. USER agrees to indemnify GLC for any loss, damage or costs including actual attorney's fees and court costs GLC may incur as a result of claims made by USER, their invitees, employees, volunteers, invited or uninvited persons attracted to the facilities by way of USER's name.
4. If requested, USER agrees to maintain a policy of liability insurance in an amount of not less than \$1,000,000.00 during the use of GLC's facilities if requested to do so. A Certificate of Insurance naming GLC as an additional insured and including a ten (10) day notice of cancellation, may be requested to be submitted at least 21 days prior to USER's schedule use of GLC's facilities.
5. Deposits and Fees are due within three business days of Facility Use approval. No event will be placed on the calendar until the Deposit has been paid. Advertising is not permitted until all items: estimated use fee, signed agreement and Certificate of Insurance have been received.
6. Grace Lutheran Church reserves the right to cancel at any time prior to receiving fees and for any breach of policy or rules after approval and contract has been signed. Any costs incurred at that point are the responsibility of contracting group.
7. The USER understands the Estimated Use Fee includes the services of the church staff required. The fee schedule is based on a 4 hour minimum and the actual fee will be determined by the actual time the facilities are utilized but in no case less than the minimum. Actual time will be calculated by the church staff on duty.
8. If USER cancels after approval process, Grace Lutheran Church will refund the Estimated Use Fee, less \$50 administrative costs.
9. If request is not approved, all deposit/fees will be returned in full within 5 days or less.

**FOR USER**

**FOR GLC**

\_\_\_\_\_  
Print name and title of responsible person

\_\_\_\_\_  
Print name and title of GLC Staff person

\_\_\_\_\_  
Signature and date

\_\_\_\_\_  
Signature and date

Additional Comments below: