

Faith Lutheran Church

Application for Use of Facilities

1. REQUESTS WILL BE REVIEWED AND RENEWED ANNUALLY

Key Issued

(Organization Making Request)

(Date of Use)

(Time - From / To)

2. FACILITIES REQUESTED: (USE LIMITED TO AREA CHECKED)

Sanctuary Fellowship Hall Office Building Education Building
 Picnic Area Grounds Kitchen Other _____

3. Use to be made of facilities: _____

Number in attendance: _____ Donation Minimum: \$25.00 per day, per building

Special Arrangements: _____

Note: Paper goods, coffee and any other consumables are not included. The undersigned must supply all their own supplies. Applicant must provide a schedule of meetings/use for the year that includes holidays.

4. STATEMENT OF APPLICANT: The undersigned applicant is an authorized official of the group submitting this application. It shall be distinctly understood, and agreed, that subject applicant and related organization making this application assume **ALL RISK FOR LOSS, DAMAGE, LIABILITY, INJURY, COST OR EXPENSE** that may arise during, or be caused in any way by, such use or occupancy of these facilities at 1115 Combie Rd., Meadow Vista, Ca. 95722.

The applicant agrees that in consideration of being permitted to use Faith Lutheran facilities, the applicant and/or applicant representing the organization, will save and hold FAITH LUTHERAN CHURCH and their agents and employees, free and harmless from any loss, claim and liabilities or damages and/or injuries to persons and property that in any way may be caused by the applicant's use or occupancy of said facilities. The use of the facilities as pertained to any fundraising is strictly limited to Non-Profit only. I declare under penalty of perjury that the foregoing statement is true and correct.

The applicant further agrees to the following Faith Lutheran Church rules regarding facility use:

All indoor facilities must be left cleaned and vacuumed (vacuums are available in each building).

Fellowship Hall: Four tables, separated and surrounded by chairs must be left set up; all remaining chairs must be stacked under the stairway. A \$50 fee will be assessed to clean and/or rearrange furniture. Applicant must inform Church office and receive prior permission to use facilities other than the above dates.

5. APPLICANT INFORMATION: **Application must be received and approved BEFORE use.**

Signed: _____ Date _____ Address: _____

Print Name: _____

Title: _____ **Email** _____ Phone: _____

6. Insurance letter **MUST** be on file for ALL incorporated organizations

Insurance Company _____ Policy No. _____

Approved By:

Dave Rosenquist

Date

Carol Davies, Office Coordinator

Date