

# Facility Request Form

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Last updated 4/29/2009

**Facility Use:** \_\_\_\_\_ **Number of People Expected:** \_\_\_\_\_

**Event Date(s):** \_\_\_\_\_ **Start Time:** \_\_\_\_\_ **Finish Time:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

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

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Keys Needed?** \_\_\_ Yes \_\_\_ No **Date Issued:** \_\_\_\_\_ **Date Returned:** \_\_\_\_\_

## Rooms/Items Requested:

**Sanctuary**

- Tables (Quantity: \_\_\_\_)
- Chairs (Quantity: \_\_\_\_)
- Microphone only (Quantity: \_\_\_\_)
- Projector
- Sound System
- Sound Technician

**Multi-Purpose Room**

- Tables (Quantity: \_\_\_\_)
- Chairs (Quantity: \_\_\_\_)
- Microphone only (Quantity: \_\_\_\_)
- Projector
- Sound System
- Sound Technician
- Keyboard

**Kitchen** (non-exclusive)

- Infant Room** (no food allowed)
- 1 year old Room** (no food allowed)
- 2-3 year old room** (no food allowed)
- Pre-K room** (no food allowed)
- Kindergarten room** (no food allowed)

**Youth Room**

**Library**

- Other:** \_\_\_\_\_
- Other:** \_\_\_\_\_
- Other:** \_\_\_\_\_
- Other:** \_\_\_\_\_
- Other:** \_\_\_\_\_



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<b>Fees:</b>	<u>Non-Members</u>	<u>Members</u>	<u>Event Fees</u>
Security Deposit (required to reserve date) .....	\$100.00	\$0.00	_____
Sanctuary .....	\$50.00	\$0.00	_____
- Sound and Audio/Visual Equipment:	\$50.00	\$0.00	_____
- Sound and Audio/Visual Technician ( <input type="checkbox"/> not required):	\$50.00	\$50.00	_____
Multi-purpose Room .....	\$50.00	\$0.00	_____
- Sound and Audio/Visual Equipment:	\$50.00	\$0.00	_____
- Sound and Audio/Visual Technician ( <input type="checkbox"/> not required):	\$50.00	\$50.00	_____
Kitchen.....	\$50.00	\$0.00	_____
Additional Rooms (____) .....	\$25.00	\$0.00	_____
Wedding Coordinator (required for weddings).....	\$250.00	\$250.00	_____
Janitorial Services (required for weddings).....	\$75.00	\$75.00	_____
Pastoral Services .....	\$150.00	\$0.00	_____

Total to be paid-in-full two weeks prior to event date.  
 Make checks payable to Grace Point Community Church: \_\_\_\_\_

## Signatures:

*Users of Grace Point facilities shall hold harmless Grace Point's members and employees from any loss, damage, liability of expense that may arise during, or be caused in any way by such use or occupancy of Grace Point facilities. The person affixing his or her signature below as the "Responsible Party" assumes this risk and liability. He/She has read and understands Grace Point's "Facility Use Guidelines and Procedures" and assumes all responsibility for their enforcement.*

Responsible Party (please print)	Signature	Date
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Coordinator (please print)	Signature	Date
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Administrative Pastor (please print)	Signature	Date
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