## **FACILITIES USE AGREEMENT**

Name of Person/Organization (	User)			
Contact Person (if different tha	n above)			
AddressCity				:eZip
Telephone ( )		E-Mail		
Type of Event				
If this event is a wedding, please also	complete and return th	e Wedding Information	Form	
Date (s) Requested	Ti	me Requested Begi	nEnd	k
If a wedding, date & time of rel	nearsal			
Number of people who will be	nere: (approximate)			
Will you need services of: Pasto	or	_ Keyboard Player_	Cat	erer
Facilities Requested for use	Sanctuary (se	ats 140 max)	Social Hall	(seats 125 max)
	Kitchen		Meeting/B	rides Room (seats 25 max)
	Pavilion and	Grounds		
A minimum deposit of \$100 plus the \$ time requested. Deposits are fully ref- curity deposit will be refunded if notifi  I/We, the undersigned, agree to inder from and against all costs, damages, o ourselves, our guests, minister, florist the purpose of our event, occasioned	undable if notification of ication is less than the 1 mnify, defend and hold claims, liabilities, and ex s, photographers, music	f cancellation occurs at I 5 days. Remainder of the harmless Hainesville Lut penses (including attorn cians, and any and all otl	least 15 days prior to scl ne balance is due on the heran Church, its agent: ey's fees) to the person her persons entering up	heduled event. Only the Sedate of the event.  s, employees, and members, (s) or personal property of
Responsible Person Signature_	-	•		Date
This completed form and the re	equired deposits sha	all be returned to the	e CHURCH OFFICE	
************THE FOI	LOWING TO BE CO	MPLETED BY HAINE	SVILLE LUTHERAN (	CHURCH *******
This person will be your designa	ated CONTACT for F	lainesville Lutheran	Church	
	Phone	<u>.                                    </u>	E-Mail	
Approval of this agreement is g	ranted on behalf of	Hainesville Lutherar	n Church	
Pastor	President or Vice	e-President	Office Manager	 Date

## THIS SECTION TO BE COMPLETED BY HAINESVILLE LUTHERAN CHURCH

DONATIONS FOR NON-MEM	IBER USE	(to be checked as appropri	ate by representative of HLC)		
\$100 Deposit to be applies to the total rental					
Security Deposit	\$100 (re	efundable after event depen	ding on condition of building)		
Use of Sanctuary	\$400				
Use of Social Hall	\$200				
Use of Kitchen	\$100				
Use of Pavilion & Grounds \$250 (4hours) \$50 each additional hour					
Use of Meeting Room	n \$50 (N	No charge for use as dressing	room for weddings)		
Custodial Fee	\$50 Cu	istodial Fee may be avoided if fa	acility is left in "as it was" condition		
Church Representative \$60/1st 4 hours. Church Representative Fee is required and shall be paid					
directly to the person who will be present during your event, then \$10 each additional hour.					
Fees for Pastor and/or Keyboard Player shall be arranged with each individual and paid directly to them.					
TOTAL AMOUNT REQUIRED	TO SECUI	RE THIS RENTAL: <u>\$200</u>	TOTAL CHARGE FOR BUILDING USE:		