## FACILITIES USE AGREEMENT

Name of Person/Organization (Use	r)				
Contact Person (if different than ab	ove)				
Address		City		State	Zip
Telephone ( )	E-Mail				
Type of Event					
If this event is a wedding, please also	complete and return	the attached Wedding	Information Form.		
Date(s) Requested	e(s) Requested End End				
If a wedding, date & time of rehear	sal				
Number of people who will be here	: (approximate) _				
Will you need services of:	Pastor;	Organis	st;	Caterer	
Facilities Requested for use			Social Hall <sub>(seats 125 max)</sub> Meeting/Brides Room <sub>(seats 25 max)</sub>		

A minimum deposit of \$100 plus the \$100 security deposit (\$200 total) is required with this signed agreement to reserve the date and time requested. Deposits are fully refundable if notification of cancellation occurs at least 15 days prior to scheduled event. Only the Security deposit will be refunded if notification is less than the 15 days. Remainder of fees are due on the date of event.

I / We, the undersigned, agree to indemnify, defend and hold harmless Hainesville Lutheran Church, its agents, employees, and members, from and against all costs, damages, claims, liabilities, and expenses (including attorney's fees) to the person(s) or personal property of ourselves, our guests, ministers, florists, photographers, musicians, and any and all other persons entering upon the church property for the purpose of our event, occasioned by or resulting in any way our use of the church facilities.

Responsible Person Sigr	nature	Date:	Date:	
This completed form and	the required deposits shall be returned to	the CHURCH OFFICE		
	E FOLLOWING TO BE COMPLETED BY HA signated CONTACT for Hainesville Lutheran (			
	Phone	E-Mail		
Approval of this agreeme	ent is granted on behalf on Hainesville Lut	neran Church		
Pastor	President or Vice – President	Admin. Assistant	Date	
Fee schedule on reverse sid	le of form			

THIS SECTION TO BE COMPLET	ED BY HAINESVILLE LUT	HERAN CHURCH				
FEES FOR NON-MEMBER USI \$100 Deposit to be app		ropriate by representative of H	VLC)			
Security Deposit \$100 (refundable after event depending on condition of building)						
Use of Sanctuary		Use of Kitchen				
Use of Social Hall	\$ 200	Use of pavilion & gro	ounds\$250 (4 hours)/ \$50 each additional hour			
Use of Meeting Room	\$ 50 No charge for use	as dressing room for wedding	S			
Custodial Fee	\$ 50 Custodial Fee	may be avoided if facility is lef	t in "as it was" condition.			
Church Representative \$ 60/ 1 <sup>st</sup> 4 hrs. 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 Organist shall be arranged with each individual and paid directly to them.						
TOTAL AMOUNT REQUIRED TO SEC	CURE THIS RENTAL: <u>\$200</u>	TOTAL CHARGE FOR BUI	LDING USE:			