

APPLICATION FOR FACILITY USE

Date: _____

Organization: _____

Contact Person & Title: _____

Address: _____

City: _____

Zip: _____

Phone: _____

Phone (Other): _____

Fax: _____

E-mail: _____

DAY OF WEEK USE

Day of Use: _____

Time: _____

Reason: _____

FACILITY REQUESTED

Choir Room (*Occupancy 15-20*) **Fellowship Hall** (*Occupancy 150 Max.*)

Approximate Attendance: _____

Special Request: _____

Signature of Contact Person: _____

Facilities Use Fee: \$50.00 per month (for groups under 50 people)

(Office Use Only)				
<input type="checkbox"/> Application	<input type="checkbox"/> Policy	<input type="checkbox"/> Signature Form	<input type="checkbox"/> Harmless Agreement	<input type="checkbox"/> Proof of Ins.
Date: _____	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<i>Revised 12/24/10</i>	

BUILDING/EQUIPMENT USE POLICY

1. User groups may use the facilities of Grace Lutheran Church providing that they stay within the rules of our church. Officers of each group are required to sign the “**Hold Harmless Agreement**” annually or when there is an officer change.
2. All outside groups using the church facilities are required to supply Grace Lutheran Church with a certificate of insurance.
3. While there is no set hourly charge for building use, groups are to provide a \$50.00 per month fee to cover the cost of utilities and supplies.
4. The church has priority usage on these facilities. This agreement is not a guarantee of use of facilities. The church will give timely notice when the facility will be unavailable for use by the applicant/group.
5. The Vice-President of the Church Council will act as liaison for each group.
6. The Vice-President, in cooperation with the office staff and custodian, will schedule all activities of the groups on the church master calendar.
7. The officers of each group will be responsible to inform the Vice-President of the Church Council, through the church office, of any time changes or location changes in their schedule of meetings.
8. The officers are responsible for the proper opening, use, and closing of the facilities.
 - A. Open and use the minimum number of doors and lights.
 - B. Thermostats/Air Conditioners:
 1. Leave thermostat as it is in the Fellowship Hall.
 2. Adjust thermostat to 50 degrees when leaving the Choir Room.
 3. Turn off the air conditioner when leaving the Choir Room.
 - C. Set up the room to meet your group’s needs. (Please carry tables and chairs - do not drag on floor.)
 - D. Tobacco use is permitted only in designated areas and is never allowed inside any building on campus.
 - E. When it is necessary for a group to have a key to the facilities, a “*Key Signature Form*” must be completed. **No duplicates of the keys are to be made.** The key must be returned promptly when no longer needed. If the leadership of the group changes

and the key is transferred, the church is to be notified immediately of the new keeper of the key.

F. When leaving:

1. Return cleaned kitchen utensils to their original location. Put all food stuffs away in air-tight containers and wipe down kitchen counters.
 2. Wash, fold, and return all towels and washcloths used no later than the following week.
 3. Make sure any appliances used are shut-off.
 4. Return tables, chairs, etc. to their original location.
 5. Turn off all lights, including bathrooms.
 6. All trash (including ashtrays) needs to be emptied into the dumpster in the parking lot.
 7. Check to see that all toilets have been flushed, and stalls and sinks are reasonably clean.
 8. Check all doors for proper closing and locking.
 9. Leave the campus in better condition than you found it.
9. The Facility Use Fee for all regular outside groups is \$50 per month for groups under fifty people. (The fee for groups with fifty or more people will be decided on a case-by-case basis.) The fee is due before the first meeting of every month for that month's usage. If the set fee is late two times in a twelve-month period, that group will lose its permission to use Grace's facilities.
10. If the group is found in violation of any part of this policy, Grace Lutheran Church will revoke the group's permission to use the facilities. The group will be notified by the Church Council's Vice-President in writing and informed of the reason for their dismissal.
11. If either the outside group or Grace Lutheran Church decide to withdraw willingly from this agreement, a thirty (30) day notice will be given in writing to the other party.
12. Grace Lutheran holds the right to change/amend/clarify this policy at any time without any prior notification.

SIGNATURE FORM

KEYS

Group Name: _____

Responsible Party Name: _____

Address: _____

Home Phone: _____ **Work Phone:** _____

Phone (Other): _____ **Number of Keys (Do not duplicate)** _____

POLICY

I/We have read the policy of Grace Lutheran Church regarding the use of their facilities. I/We agree to abide by their rules to the best of our ability.

Group Name: _____

Contract Person Signature: _____

Date: _____

HOLD HARMLESS AGREEMENT

Name of Group: _____

The undersigned states that to the best of his/her knowledge, the church property for the use of which application is hereby made, will not be used for the commission of any act prohibited by law.

The applicant agrees to defend, pay on behalf of, and hold harmless, Grace Lutheran Church of Covina, it's employees, administrators and trustees from any and all claims of personal injury, bodily injury, including death, and property damage arising out of the applicant's use.

Further, the named group/applicant shall pay for any and all damages to church property or loss or theft of such property arising for the use of said

property on the requested date(s). Grace Lutheran Church assumes no responsibility for property placed on its premises.

Name of Contact Person: _____

Signature of Contact Person: _____

Address: _____

Phone: _____

Date: _____

ADDITIONAL CONTACT INFORMATION

Please list additional contact person(s) if we are unable to contact the main applicant or in case of an emergency.

Name & Title: _____

Address: _____

City: _____

Zip: _____

Phone: _____

Phone (Other): _____

Fax: _____

E-mail: _____

Name & Title: _____

Address: _____

City: _____

Zip: _____

Phone: _____

Phone (Other): _____

Fax: _____

E-mail: _____