

FIRST UNITED METHODIST CHURCH
FACILITY RESERVATION FORM

GROUP NAME _____

Street Address _____

City _____ State _____ Zip _____

TELEPHONE NUMBER – GROUP _____

CONTACT PERSON _____

Telephone number of contact person _____

Date(s) requested _____

Hours needed (ex: 7:00 p.m. – 9:30 p.m.) _____

Room(s) requested _____

Custodial fees required _____

Deposit made _____

I UNDERSTAND THAT THE TOTAL AMOUNT OF \$ _____ IS DUE

ON _____, which is one week from my rental date.

I also understand that I am responsible to be sure the facilities are left in the condition in which we found them. Trash is to be bagged and deposited in the dumpster behind the church. The floors are to be swept and spills cleaned up where necessary. I understand that if premises are not returned to their pre-rental condition, additional charges may be assessed for any cleaning and/or repairs. I agree to pay such charges.

Any individual (or individual representing a family or group) using the facilities of FUMC will be required to sign and date this agreement indicating their understanding of the terms set forth in the policy statement for facility use and their agreement to abide by same. This agreement must be returned to the church secretary.

SIGNED THIS _____ DAY OF _____, 200_____

Renter

Church Representative