



Agreement for Use of Facilities

Today's Date \_\_\_\_\_

GROUP/ORGANIZATION \_\_\_\_\_

EVENT DESCRIPTION \_\_\_\_\_

How many people will attend? \_\_\_\_\_ If children are present, will childcare be provided? \_\_\_\_\_

CONTACT/RESPONSIBLE PERSON \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Text OK? \_\_\_\_\_ Email \_\_\_\_\_

FACILITIES REQUESTED:

- |   |   |
|---|---|
| <input type="checkbox"/> Social Hall  | <input type="checkbox"/> Nursery            |
| <input type="checkbox"/> Social Hall & Kitchen                                      | <input type="checkbox"/> Children's Chapel  |
| <input type="checkbox"/> Sanctuary  | <input type="checkbox"/> Youth Room         |
| <input type="checkbox"/> Whole Building   | <input type="checkbox"/> Small Meeting Room |
| <input type="checkbox"/> Front parking strip (for vendor booths, food trucks, etc.) |   |

DAY(S) AND DATE(S) REQUESTED: \_\_\_\_\_

\_\_\_\_\_ Time In \_\_\_\_\_ Time Out

ADDITIONAL COMMENTS OR NEEDS:

I have read all the RULES GOVERNING THE USE OF SVUUS FACILITIES and agree to all the conditions. In signing this application, I acknowledge I have the authority to accept and do accept responsibility for my group/organization and their use and care of the facility.

**COPY OF DRIVERS LICENSE/ID**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**NOTE: TOTAL AMOUNT IS DUE TWO WEEKS BEFORE THE EVENT DATE.**