



FACILITY RENTAL FORM ☐

Payment for facility use is to be given to
the secretary upon booking.

Checks are to be payable to: _____.

Church: _____

Address: _____

Phone _____

Email: _____

Name of Person/Group Booking Event: _____

Name of Contact Person (if different from above): _____ Phone: _____

Type of Function: _____ Fax: _____

Date Required: _____

Month

Date

Year

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Time(s) Required: (Set-up and clean-up times must be included in the hours)

From _____ ☐ AM To _____ ☐ AM Event Start Time: _____

☐ PM

☐ PM

Rehearsal time required? ☐ yes Date and time: _____ ☐ no

	Facility or Service	Rental Fee*	Total
	Church Rental – \$____/day (for Weddings this includes a rehearsal date/time)	\$____.00	\$
	Open/Close fee (see #4a on reverse)	\$____.00	\$
	Set up fee (see #4b on reverse)	\$____.00	\$
	Clean up fee (see #4c on reverse)	\$____.00	\$
	Damage Deposit (please provide separate check)	\$____.00	\$____.00
*Denominational Functions: No fees, however, group must provide own refreshments.		Total	\$

☐ **Sound System and Media:** If renter requires the use of the sound system, Powerpoint, or media screens, there is a separate fee.

Furniture/Kitchen Requirements (please indicate number required)

_____ Tables—Round
 _____ Chairs
 _____ Tablecloths
 _____ Instruments ☐ Kitchen
 _____ Refrigerators
 _____ Dishes & Cutlery

Equipment Requirements

_____ Monitors
 _____ Podium/Dais
 _____ Portable Mic/Speaker
 _____ Additional Microphones
 _____ Keyboard
 _____ Organ
 _____ Drums

Revised: _____



RENTAL POLICIES AND RATES

1. Please ensure to provide an email address so that a confirmation can be sent to you via email.
2. This church is a smoke-free building.
3. Confetti or rice is not to be used within the church facility or on the church property.
4. Additional charges apply if renter requires a staff member to
 - a) open/close the building — \$____.00.
 - b) set up tables, chairs, etc. — \$____.00
 - c) clean up, i.e., put away tables, chairs, vacuum carpets, mop floors, tidy washrooms, etc., — \$____.00**The renter has the option to set up and clean up themselves, with no additional charge.**
6. All renters ordinarily will conduct their functions to permit the closing of the facility by ____ pm Monday to Friday and by ____ pm Saturday and Sunday. (In certain circumstances, these times may be extended).
7. Any damage to equipment or facilities, other than from normal use, shall be the responsibility of those renting the facility. All fees for rental of facilities and equipment are payable to _____ Church and delivered to the secretary upon booking. _____ will pay its staff as required. A damage deposit of \$_____ is required. Damage deposit will be returned to renter if facilities are left in satisfactory condition (determined by _____ staff).
8. Indemnification: It is an express term of this agreement that the Renter indemnifies the Church for any costs or damages of any kind incurred by the Church, as a result of the rental of the facility by the Renter.
9. All bookings and arrangements require a minimum notice period of **two weeks** for funerals, and **four weeks** for all other events.
10. Bookings and arrangements in unusual circumstances may be directed to the office of the Lead-Pastor for approval.
11. Cancellation: A full refund will be given if cancellation notice has been given ____ weeks prior to the event. Anything less than ____ weeks notice, one-half of the payment will be refunded.

RENTAL AGREEMENT

Signatures on this form indicate the agreement of the renter to the terms and conditions, and the approval of the rental application by _____ Church.

Facility Rental to be paid in full along with this form: \$ _____

Renter's Name: _____ Signature: _____ Date: _____
Please print

Approval from _____: _____
Date

For Office Use Only:

Copies to be sent to:

- ☐ File
- ☐ Treasurer
- ☐ Custodian
- ☐ Administration
- ☐ Culinary
- ☐ Audio/Visual Technician

☐ Confirmation sent _____

Revised: _____