

Use of Church Facility Request Form

Request must be made at least 2 weeks prior to event

General Use (See Memorial for use of Sanctuary, Fellowship Hall and Kitchen)

- Sanctuary Only: \$75 for 4 hours, \$150 for 8 hours
- Ark Park with building access: \$25 for 4 hours, \$50 for up to 8 hours (Kitchen & bathroom use only)
- Classroom: \$25 for 4 hours, \$50 for up to 8 hours (no use of the church facilities is included)
- Fellowship Hall & Kitchen Only: \$100 for 4 hours, \$200 for 8 hours

Tables:

- | | |
|---|-------------------|
| <input type="checkbox"/> Rounds (up to 10) | Number requested: |
| <input type="checkbox"/> 8ft Rectangles (up to 8) | Number requested: |
| <input type="checkbox"/> Chairs up to 100 | Number requested: |

- Wedding = \$600 Up to 150 people
 - 2 hours for rehearsal + 6 hours for wedding day
 - Use of Sanctuary, Fellowship Hall, Kitchen
 - Church Hostess meeting with Bride and Groom to determine space requirements
 - ◆ Please state best days and times for this to transpire:
 - Church Hostess presence on the wedding day to assist
 - Audio Fee
 - Podium
 - Piano on Request
- Memorial = \$500 Up to 150 People
 - 6 hours for day of event
 - Meeting with the pastor
 - Use of Sanctuary, Fellowship Hall, Kitchen
 - Church Hostess presence on the day to assist
 - Audio Fee
 - Podium
 - Piano on Request

Refundable cleaning deposit of \$75 is required for all events

Name of Person Booking Event: _____

Phone: _____ Email: _____

Estimated Number of Guests: _____

Requested Event Date: _____

Requested Times

Start: _____ to _____ End: _____

The event starts at: _____

Time required: Please keep in mind that set up and clean up are expected to take place DURING the agreed upon hours. Additional fees will be assessed for going over stated end time

Additional Hours = \$35/hour *Additional hours can be requested for the day of the event only.*

Number of additional Hours:

_____(Initial) I have read and agree to the terms of the facilities use policy (available at www.arborheights.org) and understand my responsibilities.

_____(Initial) The group or individual using the facility is responsible for set up, clean up and return to normal set up of the facility.

_____(Initial) Due to limited capacity, trash must be taken off site and may not be placed in church containers or private containers located near the church building.

Signature: _____

Date: _____

For office use only:

Request received: _____ Request Approved: _____ Payment & deposit received: _____

Cleaning deposit: Returned: _____ Not returned: _____ Explanation: _____