

EMMAUS LUTHERAN CHURCH
Application for Facility Use

Activity Information

Activity: _____

Facility(ies) Requested: ___ Fellowship Hall ___ Kitchen ___ Emmaus Room ___ Sanctuary
Use will be:

_____ One Time: Date: _____ Start Time: _____ End Time: _____

_____ Ongoing: Start Date: _____ Start Time: _____ End Time: _____
End Date: _____

_____ Frequency: _____ Daily

_____ Weekly on: ___ Sun ___ Mon ___ Tue ___ Wed ___ Thu ___ Fri ___ Sat

_____ Monthly on: _____ or _____ Other _____

Number of people expected: _____

Number of tables needed: _____ Number of chairs needed: _____

Group Information

Organization Name: _____

Responsible Party: _____

Address: _____

Telephone: _____ Email: _____

Contact person for Group (if other than responsible party): _____

Address: _____

Telephone: _____ Email: _____

Check all that apply:

_____ Church Member/Organization

_____ Non-Profit Organization

_____ Not a Church Member

_____ Local Community Organization

Because of our non-profit status, Emmaus facilities are not rented to for-profit organizations.

Agreement

I have read the conditions outlined in the **Facilities Use Guidelines** and agree to abide by same, and to make every effort to insure our guests do likewise, if we are permitted to use these Facilities.

(Signature of Responsibility Party)

(Date)

FOR USE BY CHURCH OFFICE:

Request approved by: _____ Activity placed on calendar _____ (Date) _____

Total Fee: \$ _____ Deposit Received: \$ _____ Date: _____ Balance Due: \$ _____