FACILITY USE REQUEST FORM

ALL SAINTS LUTHERAN CHURCH
9131 South Howell Avenue
Oak Creek, Wisconsin 53154-4425
(414) 762-5111

AREAS REQUESTED: _____Church Proper _____Fellowship Hall

_____Church Grounds _____Kitchen Facilities

DATE REQUESTED FOR: _____

TIME REQUESTED: _____

PERSON REQUESTING USE: _____

CONTACT PHONE # : _____

PURPOSE OF USAGE: _____

I ACKNOWLEDGE THAT USAGE OF THE CHURCH PREMISES AND PROPERTY IS A PRIVILEGE EXTENDED IN GOOD FAITH AND TRUST, AND AGREE TO LEAVE THE FACILITY AS WAS PREVIOUS TO USAGE. I UNDERSTAND THAT THERE IS A USAGE FEE OF **$50.00 FOR MEMBERS / $100.00 FOR NON-MEMBERS** TO COVER THE COST OF USUAL CUSTODIAN NEEDS AND UTILITIES. I AM FURTHER ADVISED THAT ADDITIONAL FEES WILL BE IMPOSED TO OFFSET THE COSTS OF:

A. ADDITIONAL CLEAN UP SERVICES IF NEEDED.
B. REPAIRS FOR DAMAGES OR ANY STOLEN ARTICLES.

RESPONSIBLE PERSON: _____
(Signature)

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(Office Use Only)

Applicant: _____ Member _____ Lock up assured?

_____ Non-Member _____ CPIC: _____

Approved by Council: _____
(Date)

Payment Received: $_____ Date: _____

(Revised 6/8/2009)