

**TRINITY UNITED METHODIST CHURCH  
FACILITY USE SCHEDULE**

DESIGNATED USED (ORGANIZATION): \_\_\_\_\_  
 CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 BRIEF DESCRIPTION OF USE: \_\_\_\_\_

\*\*\*\*ACTUAL TIME YOU WILL BE USING FACILITY **(INCLUDE SET UP TO CLEAN UP)**\*\*\*\*

Date Requested: \_\_\_\_\_ Start time: \_\_\_\_\_ AM/PM; End time: \_\_\_\_\_ AM/PM

PLEASE CHECK THE FACILITIES TO BE USED: Only Church, Parish Hall and Lutke Conference Room use is permitted. All other areas are not for use. Trustees reserve the option to waive/modify fees.

	<b>NON-MEMBER</b> _____	<b>MEMBER</b> _____
Church:	___ \$150	Donation Only
Parish Hall:	___ \$100 for half day (1-6pm)	Donation Only
	___ \$175 for whole day (10am-8pm)	Donation Only
	___ Kitchen Use \$10 extra	Donation Only
	___ \$150 Kitchen Only	Donation Only
	___ \$50 Lutke Conference Room	Donation Only
	___ \$50 for sexton	___ \$50 for sexton
Weddings:	___ \$150 for use of church	Donation Only
	___ \$ TBD for Pastor	___ \$ TBD for Pastor
	___ \$ TBD for organist	___ \$ TBD for organist
	___ \$50 for sexton	___ \$50 for sexton
Funerals:	___ \$150 for organist	___ \$150 for organist
	___ \$50 for sexton	___ \$50 for sexton
TOTAL:	\$ _____	

**ALL DAMAGES ARE THE RESPONSIBILITY OF THE DESIGNATED USER. NO ALCOHOL, SMOKING OR ILLICIT ACTIVITY IS PERMITTED ANYWHERE ON THE PREMISES/GROUNDS.**

**A CERTIFICATE OF INSURANCE (COI) IS REQUIRED AND MUST BE PROVIDED WITH THE COMPLETED FORM.** \_\_\_\_\_

**POLICY FOR PARISH HALL USE**

It is expected that each group or individual using the building(s) will leave it clean and in the condition in which it was found. If you use the refrigerator, please be sure to remove your items. All windows are to be closed and locked in the Parish Hall when leaving the building. At the conclusion of any meeting during the heating season, the thermostat is to be turned back to 55 degrees. Rest rooms should be check to see that no water is left running. If the range is used, the gas is to be turned off after use. (Any additional cost to the church for this policy not being adhered to, will be billed back to the designated user.)

I, \_\_\_\_\_ AGREE TO ACT AS THE DESIGNATED USER FOR THE ABOVE FACILITIES ON \_\_\_\_\_. I UNDERSTAND THAT I AM RESPONSIBLE TO MAKE THE SUGGESTED DONATION OF \_\_\_\_\_ AND ASSUME RESPONSIBILITY FOR PROPER USE OF THE FACILITY.

X \_\_\_\_\_ X \_\_\_\_\_  
 DESIGNATED USER DATE APPROVED BY DATE

**All forms must be returned to the church office and approved by the Board.**