St. John's UCC Fullerton

575 Grape Street, Whitehall, PA 18052
officesecretary@sjuccf.org
(610) 264-8421

FOX HALL FACILITY USAGE FORM (ONE TIME EVENT)

(Two signed copies are required: one for Client and one for church files)

St. John's UCC is a smoke-free and alcohol-free property. No smoking or alcohol consumption is permitted anywhere on our property.

1. Fee schedule for members and non-members for use of St. John's facilities, along with payment and rate stipulations are shown on a separate sheet and are subject to change from time to time.

2. The Client will designate a person who will be the contact for the Church, provide payments where and when required, and be responsible for the group using the Church facilities.

3. The Client is expected to arrange the facilities as desired unless they paid for custodial support. Client is expected to restore the facilities back to the original arrangement with all garbage and recycling in the appropriate containers by 9:00 pm. We recycle paper, plastic, aluminum, glass and cardboard; there should be no liquid or food waste in recycling.

4. It is expected the Client will use the facilities with care, bearing in mind that there is a direct association with the church, whose worship space is attached.

5. No alcoholic beverages are to be brought in or served anywhere on church property. No smoking is permitted on the property.

6. The facilities must be vacated by 9:00 pm.

7. The Client will ensure members of their party using the facilities will not scatter to other areas of the Church building.

8. The Client shall have the sole responsibility for any and all damage caused to the Church or Church property as the result of this agreement.

9. Tables and chairs must be cleaned (for example, no gum stuck to bottom of tables and chairs) before putting them away. Cleaning supplies will be provided by the custodial staff (in the kitchen, next to the sink).

10. A church staff member may check with you to make sure that you do not need anything during the event.

11. Bring this contract with you on the day of your event.

My signature indicates I have read and agree to the above conditions:

Sign Here: _____

FOX HALL

Date of Event _____

Start Time of Event _____

End Time of Event (max 6 hours) _____

Type of Activity _____

Responsible Person: Name: _____

Address: _____

_____

Email Address: _____

Telephone: _____

Custodian Requested: _____

Amount received: _____

Signature: _____

Number of Tables and Chairs requested:

Number of people attending:

☐ Check/MO Number: _____ ☐ Credit Card (includes 3% transaction fee)

Returned in good condition? ☐ Yes ☐ No Per: _____

ONLY WEIGHTED BALLOONS PERMITTED!

Contact Custodian for Event: _____

Emergency Contact for Day of Event: Michelle Gutekunst 484-347-3629