



## EPISCOPAL CHURCH OF THE ADVENT RENTAL AGREEMENT

NAME OF RENTER

PROGRAM

RENTER ADDRESS

PHONE

EMAIL

This will confirm that, at your request, we have reserved facilities for your event, to be held on the date(s) specified in this agreement. Please review the following detailed information so that this accurately reflects your requirements.

DATE \_\_\_\_\_ PARISH HALL, 2 RESTROOMS, TIME \_\_\_\_\_  
KITCHEN

ROOM RENTAL FEE: \$50

ESTIMATED ATTENDANCE:  
CAPACITY - 40 to 60

Once space is contracted, it is placed in reserve for your event exclusively. When renting space, an extra payment will be assessed if appliances, walls, floor, etc., are damaged by negligence or other misconduct during the event to the property, furnishings or general premises. All payments are required by cash or check made to the Church of the Advent.

In signing this rental agreement, you agree to release and discharge, indemnify, and hold harmless the church, trustees and partners from and against any and all liabilities, claims, actions, costs and expenses in any way relating to or arising out of activities of the client or its members. The client agrees that they take full responsibility for all actions and activities to any person or persons they bring onto the property.

Please confirm your reservation of facilities, based on the terms set forth in this agreement by signing the original and returning it to my attention. These facilities will be held for your use subject to your executing and returning this agreement no later than \_\_\_\_\_. The church representative's name, address, and phone number are on the back of this contract. If this agreement is not returned along with required deposits by the above date, space will be available for re-lease.

\_\_\_\_\_  
AUTHORIZED CLIENT SIGNATURE

\_\_\_\_\_  
& DATE:

\_\_\_\_\_  
CHURCH REPRESENTATIVE & DATE  
B.T. Darnell, (859) 5886820