

Event Request Form

We are happy to welcome you to Church of the Master. Please follow these instructions if you wish to schedule an event, meeting or activity: The event coordinator must complete this new form and submit it to the Office Administrator email address for scheduling. We will review your request and contact you with a confirmation as soon as possible. Please wait for our email confirming your meeting date, time and location before publicizing your event.

PLEASE NOTE:

- Church needs and activities have first priority including unexpected events (i.e. funerals) which may cause cancellation or rescheduling of your requested date.
- **PARKING: Sufficient onsite parking is not guaranteed.** We have 16 regular stalls and 2 Handicap stalls.
- **No alcohol is permitted on the premises.**

EVENT BASICS

Event Description _____

Event Date: (1st choice) _____ (2nd choice) _____

Start Time: _____ End Time: _____

Recurring Meeting? Yes _____ No _____ If Yes, how often? _____

Maximum Expected Number of: Adults _____ Youth (age 12-18) _____ Children (under 12) _____

Event Coordinator Name: _____

Coordinator Email: _____

Coordinator Phone: _____ Alternate Phone: _____

SPACE/SERVICE REQUESTS

Please check all that apply. **The fees listed below do not apply to church sponsored activities & events.**

	Space/Service Requested	Fee for Use	# of Hours	Subtotal
	Sanctuary (Includes Gathering Space) WITHOUT use of AV and Sound Equipment	\$25/hour		
	Sanctuary (Includes Gathering Space) WITH use of AV and Sound Equipment. *Sanctuary AV and sound equipment require church staff to operate. Separate, required staff fees listed below.	\$50/hour		
	Staff Member to Run Sound Equipment	\$50/hour		
	Staff Member to run ProPresenter/slides/screens *This will include hours prior to the event to prepare a program to be seen on the screens. The files for this preparation are due to the staff member 1 week prior to the event. NO EXCEPTIONS and NO LAST-MINUTE CHANGES. Initial Here to Agree _____	\$50/hour		
	Piano	\$25/event		
	Meeting/Classroom	\$25/hour		
	Fellowship Hall	\$25/hour		
	Gym	\$25/hour		
	Nursery	\$25/hour		
	Main Kitchen (cooking)*with use of any of the following: cookware, stove, oven and/or dishwasher	\$50/hour		
	Outdoor Space- Parking Lot (blocked off for meeting, not parking). *Fee is refundable provided area is left in good condition (no trash or damages).	\$25/event		
	Outdoor Space- Grove Street Patio Area (for meeting) *Fee is refundable provided area is left in good condition (no trash or damages).	\$25/event		

Estimated Total for Event \$ _____

FURNISHING AND EQUIPMENT REQUESTS

Outdoor spaces require that you bring your own furnishings. Indoor spaces other than Sanctuary are not preset with any furniture. Furnishings requested (how many of each): chairs, tables (60" round or 8 ft rectangle), high chairs, easels, a/v equipment, piano (see protocol), any other miscellaneous equipment:

Requestor Signature: _____ Date: _____

TECH AND LICENSING AGREEMENTS

1. Church of the Master will not be held responsible for unlicensed use of materials shown or recorded in our building. If the use of any material is brought into question or a lawsuit is brought against the group for using the material without prior permission or proper licensing, the group in question will take sole responsibility for any legal matter. All recordings must be covered under the licensing of the group using the sanctuary and equipment. The use of any pre-recorded music/videos in the church will not be covered by the licensing purchased by the church.

Licensing Company _____

License # _____ Date License Expires _____

Signature _____ Date _____

2. Any group not directly part of the ministries of Church of the Master requesting use of the Sanctuary Technology must agree to the assigned fees. This document will be treated as an estimate, which will be signed by the requesting group. The tech staff will record hours worked and present the requesting group with a final invoice.

_____ Please Initial here indicating that you agree to this statement.

I have read and agree to the terms of this estimate and understand that the final cost may increase or decrease depending on the final number of hours worked by each technician/staff member.

Signature _____ Date _____