

North Chatham United Methodist Church

Facilities Use Form

Please fill in the required information and return to ncumc.trustees.mailbox@gmail.com

The request will be reviewed by the Trustees in coordination with the Pastor and confirmation will be given by phone or email. Please allow at least a week to review the request and to confirm with the Pastor that there is no conflict with church events. If an unexpected event occurs (such as a funeral), the Trustees have the option to rescind the use of the facility. The attached **Safe Sanctuaries** form must be completed for all events.

This form states the specific room (s) allowed to be used. Any room not stated on this form would need to be authorized by the Trustees for the event. Payment is due when the Trustees confirm the request. Payment can be made to by check to NCUMC and mailed to P.O. Box 105, North Chatham, N.Y. 12132 or by Paypal to ncumceb@gmail.com.

Event Description_____

Month

Please select ▾

Day

Please select ▾

Start Time

Please select ▾

End Time

Please select ▾

Space Requested

Please select ▾

Will a NCUMC member be present?

Please select ▾

Suggested Donation for Use of Church Space		Your Total
Members using the Church Fellowship Hall for pesonal, non commercial event. Includes the use of bathroom and refuse disposal. Does not include the use of the dumpster.	\$25 per day	Please select ▾
Non-Members using the Fellowship Hall. Includes use of the bathrooms and refuse disposal. Does not include the use of the dumpster. Please considerbeing generous if you are hosting a large fundraiser event.	\$50 per day	Please select ▾
Any event requiring the use of the Sanctuary would need approval from the pastor.		
Minimum Pastor’s suggested gratuity for conducting a ceremony and pre-event counseling.	Please select ▾	Please Select ▾
Sound equipment operator	\$100	Please select ▾
Chair lift operator & Safe Sanctuary overseer	\$100	Please select ▾
Use of the kitchen is a separate fee from the use of the Fellowship Hall and would include the use of the kitchen for 1 prep day and 1 event day.	\$225	Please select ▾

Your Total to be submitted at least 4 weeks before event		
---	--	--

I agree to the terms of use as stated above of the Fellowship Hall and/or the Sanctuary at the North Chatham United Methodist Church and understand that I assume the responsibility to repair, replace, or restore any damage incurred.

Submitter’s Name

Phone Number

Email

Signature of responsible party

North Chatham United Methodist Church
Safe Sanctuary Policy for Use of Facility

Adults attending any function using the North Chatham United Methodist Church property shall observe the “Two-Adult Rule” at all times so that no adult is ever alone with children or youth or vulnerable adults at an event or activity held at the church. The two-adult rule requires that regardless of the size of the group, there shall always be two unrelated adults (over the age of 18) present. All event activities shall occur in open view; each room or space where events occur must be open to public view.

The “Two Adult Rule” may include the presence of an adult “roamer” who moves in and out of rooms where there are activities. No child, youth, or vulnerable adult shall be left unsupervised while attending a program or event.

All adult “roamers” shall be observant for unusual behaviors and signs of child, youth, and vulnerable adult abuse and shall report them immediately to the pastor or roamer.

The person(s) responsible for event/ program should be aware of these Safe Sanctuaries Policies before the event and shall agree to covenant with the North Chatham United Methodist Church program to fully cooperate with these abuse prevention strategies.

I have read the above and agree to follow the NCUMC Safe Sanctuary guidelines.

Signature _____

The North Chatham United Methodist is an alcohol & tobacco free facility, no alcoholic beverages or smoking is allowed on the property.
Form revised April 2025