

Facility Use for Non-Church Function Request Form

Poplar Springs Church Adrian, Ga

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|---|------------------|-------------|-----------|
| Purpose of Event: | | | |
| Date of Event: | | | |
| Times: | Start Time | Finish Time | |
| (Include Setup, Tear Down And Cleanup Time) | | | |
| Number of Attendees: | | | |
| Areas Required: | Sanctuary | Kitchen | |
| | Fellowship Hall | Outdoors | |
| | Classroom: _____ | | |
| Usage Fee for Fellowship Hall and/or Kitchen: | | \$50.00 | |
| Usage Fee for Sanctuary: | | \$150.00 | |
| Security Deposit for any use (refundable): | | \$100.00 | |
| | | Total Fees: | |
| <p>I have read and understood the Bylaws of Poplar Springs Church.</p> <p>I will abide by the Bylaws of Poplar Springs Church.</p> <p>I understand I am financially liable for any damage to church facilities.</p> | | | |
| Undersigned | | | |
| | | Print Name | Signature |
| <u>Date: (mm/dd/yyyy):</u> _____ | | | |
| <u>Telephone(s):</u> _____ | | | |
| <u>Email(s):</u> _____ | | | |
| <u>Address(s):</u> _____ | | | |

| | | |
|---|------------|-----------|
| Facility Use Administrator | | |
| | Print Name | Signature |
| Trustee Approval | | |
| | Print Name | Signature |
| Ensure next Church Conference is notified of Church Facility Use. | | |
| <u>Date: (mm/dd/yyyy):</u> _____ | | |

| | |
|--|-----------|
| <u>Trustee or designee doing inspection of the facilities before deposit is returned</u> | |
| <u>Date: (mm/dd/yyyy):</u> _____ | |
| Print Name | Signature |