

Mount Olivet United Methodist Church Building Use Application

Mount Olivet reserves the usage of the facility for non-profit groups and not for profit events

Group or Individual : _____

Address: _____

Phone (home): _____ Phone (cell): _____ Email: _____

Type of Function: _____

Date: _____ Function Time: _____ Number of people expected: _____

Anticipated Arrival Time: _____ Anticipated Exit Time: _____

What facilities are needed:

Kitchen: _____ Sanctuary: _____ Library: _____

Room A: _____ Room B: _____ Room C: _____

Other: _____

Kitchen, Cooking and Serving use (please write a brief description of kitchen use requested) : _____

Who will be responsible for the following:

Room set-up: _____ Contact Number: _____

Restoration: _____ Contact Number: _____

Return tables, chairs and other objects to original location (Diagram included)

Clean-up: _____ Contact Number: _____

Bag up trash, pick up clutter, wash & replace any kitchen items used, clean all counters, sinks, etc.

Unlock: _____ Contact Number: _____

Lock-up: _____ Contact Number: _____

The church will be responsible for cleaning the rest rooms, vacuuming carpets and trash removal.

Note: An inspection will be made following use and the user notified if conditions are not completely restored and/or damages are done. **A cleaning fee, to be paid to our custodian, will be charged if restoration and cleanup are not completed.**

Covenant: In exchange for use, I promise to follow the guidelines and regulations governing the use of this facility, and will be responsible governing the use of this facility, and **will be responsible for it being restored to the condition prior to my use.**

Date Submitted: _____ Applicant Signature: _____

Date Approved: _____ Board of Trustees, Chairperson: _____

Mount Olivet United Methodist Church Building Use Worksheet

Updated 12/2/15

