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 Ind	ividual :		
Address:			
Phone (home):	Phone (cell):	Email:
Type of Fun	ction:		
Date: Function Time:		Function Time:	Number of people expected:
Anticipated Arrival Time:		An	ticipated Exit Time:
What faciliti	es are needed:		
Kitchen: Sanctuary:		Sanctuary:	Library:
		Room B:	
		Room D.	
		use (please write a brief des	scription of kitchen use requested):
Who will be	responsible for the	following:	
Room set-up:			Contact Number:
Restoration			Contact Number:
			ocation (Diagram included)
Clean-up:			Contact Number
Clean-up:Contact Number: Bag up trash, pick up clutter, wash & replace any kitchen items used, clean all counters, sinks, etc.			
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Unlock:			Contact Number:
Lock-up:			Contact Number:
The cl	hurch will be resp	onsible for cleaning the i	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 pr		
Date Submitted:		Applicant Signature	y:
Date Approved:		Board of T ₁	rustees, Chairperson:

Mount Olivet United Methodist Church Building Use Worksheet

Updated 3/8/2020

