

Review Date:	_____
Approval Date:	_____
Approved By:	_____

### ~ Building Use Application Form ~

We are happy to share the use of our church facility for functions of our church or the local community. In order to assure such arrangements are successful, we ask you to complete this brief application (including a WAIVER OF LIABILITY form), which will be submitted to our Trustees/Executive Committee for review. All events or building uses not part of our regular congregational activities need to follow this process for three reasons: first, to ensure events occurring at our church are consistent with the mission and policies of Hope Lutheran Church; second, to ensure coordinated scheduling and avoid scheduling conflicts; and third, to ensure both the applicant submitting this document and the provider (Hope Lutheran Church) understand their responsibilities for such events. In addition to the standard WAIVER OF LIABILITY, we require any user of our facilities to provide proof of appropriate insurance, naming Hope Lutheran Church as a co-insured party. If you are interested in using our facility on an ongoing or regular basis, please note this on your application and we will contact you for any additional information. Arrangements for the use of our facility on a regular basis will be reviewed annually. The completed application and waiver can be mailed to us or submitted via email to: [office@hopelc.org](mailto:office@hopelc.org).

Agreed Amount of Donation: \$\_\_\_\_\_ (4-hrs. – \$100.00 for one/first room, \$50.00 each additional room)

Application Date: \_\_\_\_\_, 20\_\_\_\_

Name of Group/Requestor: \_\_\_\_\_

Contact Person for Group: \_\_\_\_\_

Email Address/Daytime Cell Phone of Contact Person: \_\_\_\_\_

Purpose/Description of the Function/Event: \_\_\_\_\_

Date(s) Requested for Use: \_\_\_\_\_

Estimated Time and Duration of Use: \_\_\_\_\_

Estimated Number of Attendees: \_\_\_\_\_

Space(s) Needed (check below):

- ~ Kitchen    ~ Large Classroom    ~ Sanctuary    ~ Small Classroom    ~ Grove    ~ Parking Lot

Special Needs: \_\_\_\_\_

Are you a member of our church?    ~Yes    ~No

Signature of Person Responsible: \_\_\_\_\_