

Building Usage Agreement [updated 1-10-2019]

Atlanta Christian Church, Atlanta, IL

Date(s) Requested for Building Usage _____

Times Requested from _____ am/pm to _____ am/pm (Include set-up & tear down)

Event Description _____

Number of People Attending Event _____

PLEASE NOTE: The ACC leadership and staff reserve the right to cancel or move your reservation to another location in the church in the event of a funeral and/or dinner. We will work directly with you to figure out what would be the best option for all parties involved. Because we are a “non-profit” organization, we highly discourage the occurrence of financial transactions or sales of goods or services for profit. Special cases may be considered by the church leadership.

Information of Person Requesting Usage:

Name: _____

Address: _____

Daytime Phone: _____

Email: _____

Resources Needed

- Sound Equipment*
- TV/DVD/Projection
- Piano
- Other _____

Room(s) Requested

- Sanctuary
- The Gate**
- Kitchen (in The Gate)
- Basement Fellowship Hall**
- Room # _____

*Use of sound in the sanctuary or the Gate might require an operator. Please discuss your needs with an elder or staff person 2 weeks prior to your event. If you need a technician to run sound for your event, the fee is \$50 and you must pay them directly.

**Setting-up and taking-down tables and chairs (available in both the basement fellowship hall and in The Gate) is the responsibility of the person/group scheduling the event.

We realize that those planning an event cannot anticipate the actions of all the guests, but we ask that you call attention to these restrictions: No Smoking/Vaping In Building No Alcoholic Beverages Permitted on Church Property

Tenant shall indemnify and hold harmless the church from any loss or damages in the use of the premises. Under no circumstances shall the church be liable for any loss or damages to tenant, tenant's guests or property.

I have received and read all building usage policies and agree to abide by said policies and this usage agreement.

Signature of Responsible Party _____

Date _____

OFFICE USE ONLY

Date Received _____

Approved By _____

Written on Calendar Yes/No

Tax Exempt Form Received Yes/No

Deposit Received Yes/No

Notes _____
