



REQUEST FOR USE OF FACILITIES AT CHRISTIANA LUTHERAN CHURCH

COMPLETE AND RETURN TO CHURCH OFFICE 30 DAYS BEFORE DATE OF USE

Today's date: _____ Date(s) needed _____

Activity (be specific): _____

Time of activity _____ to _____

Number of people attending _____

Person or group requesting use _____

Person requesting is responsible for cleanup; if different, please list the person's name on the next line

Person responsible for clean up _____

Home Phone _____ Work Phone _____

Areas of the Church needed: Fellowship Hall? Nursery? Youth Room?
Education Wing?

Equipment needed? _____

Fees paid – see fee schedule \$ _____

Christiana's Facilities Use Policy is attached. Please read and comply with all guidelines.

The deposit will be withheld if the rooms have not been left in good condition.

Signature of Requesting Group

_____ Date _____

I hereby indemnify the CHURCH of any
and all damages to any persons or property