

APPLICATION FOR FACILITY USE: ST. MATTHEW LUTHERAN CHURCH

517-694-0978

Office hours: M-F 9 a.m. - 12 p.m.

MEMBER APPLICATION

In the spirit of Christian fellowship and love, St. Matthew Lutheran Church encourages the use of the church facilities. This includes, but may not be limited to: congregational-fellowship gatherings, member-family gatherings which encourage Christian fellowship and love, and other events allowing St. Matthew Lutheran to reach out to individuals, the community and the world with an example of Christian fellowship and love.

The Facility Use application is to be completed by the requesting individual. The facility use request will be reviewed and appropriate requests will be approved and scheduled.

St. Matthew Lutheran Church is glad to have the opportunity to make our facilities available to those who desire to use them. We trust you will follow these rules and will have a most enjoyable time here. Thank you for your cooperation.

Expectation for Guest Groups:

1. The applicant agrees to abide by the rules and regulations as prescribed by St. Matthew Lutheran Church.
2. A telephone is available for emergency use only. The Building Supervisor has access as needed.
3. Application for facility use should be made at least twenty one (21) days prior to the date the event is to take place. Permit is non-transferable. A **\$25 security deposit** and **\$50 building supervisor fee** (\$75 total) is required to hold requested dates. You will be notified when the application is approved or denied. Upon approval, the rental fee must be paid prior to the event date. If denied, your \$25 security deposit and your \$50 building supervisor fee will be returned to you.
4. The applicant signing this form is responsible for any additional fees incurred and/or loss or damage to Church property during the time the building is used and will make monetary restitution for any loss or damage that may occur. Damage, beyond normal wear and tear, to the facility is the responsibility of the applicant; the guest group applicant must replace or repair at the church's option. An "Incident Report" is available from the Building Supervisor or church office.
5. **The adult completing this application is responsible for returning the rooms used by the guest group to their original condition as outlined in checkout lists provided for each area used. Otherwise, the \$25 security deposit will not be refunded.**
6. Property cannot be stored in the church by any outside organizations or groups without special written permission.
7. Each individual is responsible for his/her own personal possessions and valuables.
8. All activities must be adequately supervised by a responsible adult 18 years old or older. The organization/group using the church facilities is responsible for the control and conduct of it's participants and spectators. All participants spectators or others connected with the activity must remain only in the specifically designated rental areas.
9. All state, fire and safety regulations must be followed during the time the facility is being used. Absolutely no fire, open flames, candles, grills, etc. will be allowed inside the church building.
10. **The use of rice, glitter or confetti is prohibited.**
11. The possession or consumption of illegal drugs on church premises is strictly prohibited. The use of tobacco products at any time is prohibited inside the facility and allowed outside only at specifically designated areas. Alcohol may only be used if approved by the Board of Trustees.
12. **Use of church supplies and materials by the organization or group is strictly prohibited unless special permission is received in advance.**
13. An additional fee of \$50 will be charged to use any audio/visual equipment.
14. We do not allow any PETS in the building without prior agreement and arrangement ("Leader Dogs" exception).
15. Use designated parking areas for parking; avoid having any cars or vehicles on the grass at any time.
16. No guest or group may teach or behave in a manner contrary to the doctrines of the Missouri Synod Lutheran Church. For specific questions contact the church office.

Insurance for Guest Groups:

St. Matthew Lutheran Church does not provide accidental/medical insurance for our guest groups. Our insurance carrier now requires that we obtain certificates of insurance naming St. Matthew Lutheran Church as an ADDITIONAL INSURED from groups who are using our facilities. The minimum limits of liability insurance that users and/or renters must have on their current policy is \$1,000,000 per occurrence and a \$1,000,000 aggregate. The minimum limit of medical coverage is \$5,000. The users and/or renters policy must also include Fire Legal Liability, Sexual Misconduct coverage and Hired & Non-owned Auto coverage. A sample form with the necessary wording is available from the church office. Your insurance agent should mail or fax the Certificate of Insurance to the church office. We must have the certificate in our office.

b. MEMBERS of St. Matthew Lutheran Church may schedule rental time for a fee of:

- * \$25 for up to 7 hours
- * \$50 for any time over 7 hours.

Scheduled Time Periods:

Monday through Friday+:	Saturday:	Sunday:
6:00 p.m. to 10:00 p.m.	7:00 a.m. to 11:00 p.m.	1:00 p.m. to 10:00 p.m.

+ On weekdays when school is not in session hours will be from 9:00 a.m. to 10:00 p.m.

Cancellation Policy:

Holders of facility use agreements must cancel by giving **7 days** notice prior to the event, otherwise the \$25 security deposit will be forfeited. Please notify the church office immediately if cancellation is necessary. Phone # 694-0978

Departure and Clean up:

All clean up must be completed by the organization or group, and departure should occur no later than the scheduled time. Contact the church office if you are interested in purchasing clean-up services.

Clean up check lists will be provided at the time rental fees are paid. It is the responsibility of each renter to clean the areas used and fill out the check list.

ST. MATTHEW LUTHERAN CHURCH

2418 Aurelius Rd.
Holt, Michigan 48842
517-694-0978

Member Application For Facility Use:

Date(s) of Activity: _____

Today's Date: _____

Rental Time Desired: _____ Time: _____

Monday Through Friday +:
6:00 p.m. to 10:00 p.m.

Saturday:
6:00 a.m. to 11:00 p.m.

Sunday:
1:00 p.m. to 10:00 p.m.

On weekdays when school is not in session hours will be from 9:00 a.m. to 10:00 p.m.

Area to be used: Sanctuary/Gym Fellowship Hall Lounge/Office Kitchen Chapel

Description of Activity: _____

Guest Group Information (circle which apply):

Youth Men Women Couples Singles Families Other

of people anticipated: _____ Organization Name (if applicable): _____

ARRIVAL AND SET UP:

In the event that additional equipment and set up is needed, please contact the church office. The Building Supervisor reserves the right to cancel any equipment usage that is deemed inappropriate.

Adult Responsible for Fees, Damage Expenses, Facility Use Agreement:

Name: _____
Address: _____
City, State, Zip: _____
E-mail Address: _____

Contact Information:
Home Phone: _____
Work Phone: _____
Pager/Cell: _____

- A clean up/checkout list will be completed by the renter and left in each room that was used.
- Will need audio/visual equipment and operator: standing microphone/wireless microphone/ _____
- \$50 additional fee.

HOLD HARMLESS: Group shall hold harmless St. Matthew Lutheran Church/Holt Lutheran Schools/SonShine Early Childhood Center for any personal injury claims that may originate with any member of the group or the group's guests arising out of the group's use of the facility. The group shall be liable for any damage to St. Matthew's property resulting from acts of its members or guests while on St. Matthew's property.

Requests will be processed in the order in which they were received. Consideration and approval/denial of this application will occur within seven days of application submission and you will be notified accordingly.

\$25 Security dep. Check # _____ received date _____ by _____
\$25 returned to _____ by _____

**St. Matthew Lutheran Church
Incident Report**

**This report is to be completed by the Building Supervisor for any unusual event or accident as soon as practical,
and as completely as possible.**

Date of Incident: _____ **Time:** _____

Building Supervisor: _____

Statement of Incident (use other side of paper if necessary):

Name of Person(s) Involved (or Person Injured in case of Accident):

Was Incident (or Accident) due to a violation of Facility Use Agreement? **Yes** **No**

Name(s) of Witness(es) to Incident or Accident:

Action Taken by Building Supervisor:

Signature of Group Representative

Date

Signature of Building Supervisor

Date