

APPLICATION FOR USE OF CHURCH FACILITIES

FIRST CONGREGATIONAL CHURCH OF SOUTHAMPTON

P.O. BOX 145

Southampton, MA 01073

Phone 413-527-1173

Effective 20 May 2009

Name of person our organization: _____

Specific Spaces Desired

<input type="checkbox"/>	Sanctuary	\$225.00
<input type="checkbox"/>	Kitchen	\$95.00
<input type="checkbox"/>	Parish Hall	\$90.00

Church Members using the facilities for church functions (i.e. weddings, etc.) pay 50% of above fees. There is no fee for church-sponsored events. All above listed fees are applicable to non-church events. Any exceptions are to be taken up with the Trustees.

DATE DESIRED: _____

TIME DESIRED: _____

PURPOSE OF USE: _____

WILL THE ELEVATOR BE NEEDED?

Yes No

EQUIPMENT OR APPARATUS NEEDED: _____

PERSON RESPONSIBLE FOR RENTAL: _____

ADDRESS: _____

TOWN: _____

STATE: _____

ZIP CODE: _____

TELEPHONE NUMBER: _____

E-MAIL: _____

The undersigned assumes full responsibility for all actions in the church and on the church grounds. Please adhere to the general considerations below.

For any building or facility concerns please contact: Jim Belisle, Home: 413-527-8235, Cell: 413-219-6904

SIGNATURE: _____

Date: _____

PLEASE NOTE: Payment must accompany this application in order to reserve the specific space for the specific date desired.

General Considerations:

1. Smoking is not permitted in the church buildings. Smoking is only permitted on the rear entrance porch.
2. The First Congregational Church cannot be responsible for personal belongings.
3. The person who signs this form must make sure the church facilities are left as they found them and the doors and windows are secured and locked.

CHURCH OFFICE USE:

Trustee Approval: 1. _____

2. _____

Method of Payment:

Check Cash

Received by: _____

Date: _____