

**MAIZE UNITED METHODIST CHURCH
REQUEST FOR USE OF CHURCH FACILITIES**

Please sign and return this form to the church office. All contract information is required.

Group/ Person renting: _____

Purpose of event: _____

Contact Person: _____

Address: _____ Phone# _____

Date(s) of event: _____ Time of event: _____

Room Scheduled for event: _____

Room Fee: \$ _____

Key Deposit: \$ _____ **KEY DEPOSIT:** There will be a key deposit of \$100.00 for anyone using the building. The \$100.00 must accompany this form. Make checks out to Maize United Methodist Church. At the end of your building use, return the key and you will be refunded the deposit money.

Cleaning Fee: \$ _____

Less Deposit: \$ _____

TOTAL DUE: \$ _____

NON MEMBERS

- _____ * Sanctuary \$200.00/3 hrs & \$50.00/hr after 3 hrs.
- _____ * Christian Life Center (Gym) \$75./2hrs. & \$25./hr after 2
- _____ * Kitchen: \$75./hr & \$25./after 2
- _____ Parlor: \$20./hr
- _____ Classroom: \$20./hr

*****A cleaning fee of \$100.00 will also be applied as marked***

_____ **MEMBERS:** No charge (Any donations will be given to Trustees)

_____ **APPROVED NON-PROFIT ORGANIZATION:** No charge

FUNERALS: NO CHARGE - (Donation to the Pastor &/or church appreciated)
MEMBERS & NON-MEMBERS

Signature of Responsible Party

Date

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WEDDINGS INFORMATION:

Date: _____ Time(no later than 4:00 p.m.) _____

Rehearsal Date: _____ Rehearsal Time: _____

Total time Use (consider time for decorating, pictures, etc : From: _____ To: _____

Reception @ Church: Yes No Rehearsal dinner @ church: YES NO

Number Attending: Dinner _____ Wedding _____ Reception _____

Officiating Pastor: _____ Phone Number: _____

Church Pianist Needed: Yes No

Video: Yes No Sound: Yes No

Bride's Name: _____

Bride's Address (city, state, zip): _____

Bride's Phone Number: (Home) _____ (Cell) _____ (Work) _____

Mother-of-the-Bride's Phone Number: _____

Bride's email: _____

Groom's Name: _____

Groom's Address(city, state, zip) _____

Groom's Phone Number: (Home) _____ (Cell) _____ (Work) _____

Mother-of-the-Groom's Phone Number: _____

Groom's email: _____

Policies, Rules, and Regulations for Use of Church Facilities

- 1.** All wedding couples **MUST** schedule at least 3 hours of counseling with the officiating Pastor after initial meet and greet.
- 2.** The undersigned agrees to assume personal responsibility for the proper care and use of the furnishings, equipment, the facilities, and the proper conduct of those attending. Any property damage above the deposit amount will be the sole responsibility of the undersigned. A full deposit will be returned if there is no damage to the church furnishings, equipment, or facilities.
- 3.** Persons needing access to the church building should coordinate entrance with the Pastor or church Trustee member.
- 4.** At least one of the undersigned will be present at all times.
- 5.** **NO** alcoholic beverages, drugs, or cigarettes are to be used on the church premises including the parking lot.
- 6.** Room(s) will be left in the condition they were upon entry (trash picked up and put in the outside receptacles , toys picked up, etc.).
- 7.** Kitchen needs to be cleaned with all sinks washed and wiped dry, dishes done and put away, food served removed from the property, etc.
- 8.** No paint, marking products, or fastening products can be used on the walls or floors of the Sanctuary, Christian Life Center, Kitchen, or Fellowship Hall.
- 9.** A minimum of 30 days for weddings is required for cancellation. If cancellation is not received within specific time period, then the deposit is forfeited.
- 10.** Only those areas that are requested will be used.
- 11.** Responsible adults will supervise all children.

Signature: _____

Signature: _____

Print name: _____

Print name: _____

Date: _____

Date: _____