

North East United Methodist Church Facility Use Agreement (Authorized by the NEUMC Trustees 4/20/11)

This agreement is made between the North East Methodist Church (NEUMC) and _____, (referred to as "USER") concerning the use of the following NEUMC facilities on the dates and times specified below:

Facilities: _____

Dates and Times: _____

The USER agrees to comply with the following terms and conditions:

The USER will pay the amount of \$ _____ as rent for the use of the facilities.

Payment will be made as follows: _____

The USER agrees to comply with the following terms and conditions:

1. The parties agree that the USER, its agents and employees are not agents or employees of NEUMC. The USER will be solely responsible and will assume full responsibility for the actions and omissions of its members, guests, agents and employees when using NEUMC facilities and equipment. USER is solely responsible for worker's compensation coverage of its employees.
2. The USER assumes all responsibility and liability for the requested use and agrees to defend, indemnify and hold NEUMC harmless from any and all loss, damage or injury to any person or property arising from use of the facilities.
3. The USER will reimburse NEUMC for any and all damages caused to the facilities and/or the equipment therein. At the option of NEUMC, the USER will submit a damage deposit in the amount of \$ _____. The damage deposit will be returned to the USER if there are no damages to the facilities or equipment.
4. The USER will be solely responsible to provide adequate supervision of the activities conducted in the NEUMC facilities.
5. At the request of NEUMC, USER will provide proof of liability insurance naming NEUMC as co-insured.
6. The USER will comply with all applicable state laws and NEUMC regulations. Specifically:
 - a. Furniture moved from adjacent or storage areas must be returned to those areas after use.
 - b. Floors must be left free of paper and trash. Trash cans will be emptied into the outside trash dumpsters

- c. No perishable food shall be left anywhere in any facility
- d. Use of the facilities shall be limited to the use of the rented areas and rest rooms
- e. Adult supervision is required when minors use the facilities.
- f. Smoking is not permitted anywhere within the church facilities or on church campus except in designated places.
- g. Use of alcoholic beverages is prohibited.
- h. Use of candles is prohibited –except Sanctuary.
- i. USER will make sure all windows and doors are closed and locked. Also will make sure all windows, fans and lights are turned off.
- j. User must provide a list of any equipment user proposes to bring onto church property. The list must be approved prior to user bringing the equipment onto church property.

Standard Rental fees (subject to change by Senior Pastor):

Single Class Room.....\$50.00	Chapel..... \$100.00
Sanctuary.....\$250.00	Fellowship Hall.....\$150.00
Kitchen.....\$75.00	Playground.....\$75.00
Sound Board Operator.....\$30.00/hour	Parking Lot(s).....\$100.00
Access deposit (refundable).....\$50.00	
Refundable Clean-up Deposit for Kitchen, Fellowship Hall and/or Sanctuary..\$200.00	

AGREEMENT

We, the undersigned representative(s) of the organization named in the application, agree to abide by the policies of the Board of Trustees of the North East United Methodist Church and agree further to indemnify and save harmless the North East United Methodist Church and its trustees, its employees and agents from any act of commission or omission which may result in any personal injury or property damage arising out of our organization's use of church facilities and/or grounds.

Signature (organization or persons)	Signature – Trustee
Title _____	Mailing Address _____
Phone Number _____	
Email Address _____	

NORTH EAST UNITED METHODIST CHURCH
GROUP AND FUNCTION PROFILE

IN ADDITION TO THE USAGE CONTRACT, WE REQUIRE THAT EVERY GROUP
AND FUNCTION PROVIDE THE FOLLOWING INFORMATION:

NAME OF ORGANIZATION _____
FUNCTION OF ORGANIZATION _____
SIZE OF GROUP _____

CONTACT PERSONS: (PLEASE LIST TWO)

NAME _____
ADDRESS _____
CITY/STATE/ZIP _____
PHONE _____
ALTERNATE PHONE _____
E-MAIL _____

NAME _____
ADDRESS _____
CITY/STATE/ZIP _____
PHONE _____
ALTERNATE PHONE _____
E-MAIL _____

PARENT ORGANIZATION OR HEADQUARTERS: (IF APPLICABLE)

NAME _____
PHONE _____

SPECIFY MEETING/DATES/TIMES

<u>DAY</u>	<u>MORNINGS</u>	<u>AFTERNOONS</u>	<u>EVENINGS</u>	<u>ROOM #</u>
MONDAY	_____	_____	_____	_____
TUESDAY	_____	_____	_____	_____
WEDNESDAY	_____	_____	_____	_____
THURSDAY	_____	_____	_____	_____
FRIDAY	_____	_____	_____	_____
SATURDAY	_____	_____	_____	_____
SUNDAY	_____	_____	_____	_____

FREQUENCY OF MEETINGS (EX: 1ST MONDAY, EACH MONDAY ETC)

ADDITIONAL INFORMATION OR SPECIAL REQUIREMENTS:

