

**ST. JAMES LUTHERAN CHURCH FACILITY USE FORM**



Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

Date of Event \_\_\_\_\_

If an event, briefly describe the activity being held (note that the facility is not to be used for partisan political reasons): \_\_\_\_\_

Time and Duration of Event \_\_\_\_\_

Set up/Clean up Requirements (include the amount of time needed for set up and clean up) \_\_\_\_\_

Deposit Received (Church signature and Date) \_\_\_\_\_

Balance Due \_\_\_\_\_ Final Payment (Church signature and Date) \_\_\_\_\_

**I have read the Facility Use Guidelines of St. James Lutheran Church and agree to abide by its contents. St. James Lutheran Church will NOT be responsible for any injury which occurs while going to or from, or during the use of, the facilities.**

User's Name: \_\_\_\_\_

User's Signature: \_\_\_\_\_

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