

## LakeSide Fellowship UMC Building Use Application

Group Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Meeting Dates: \_\_\_\_\_ Time Needed: \_\_\_\_\_  
(Start date – End Date)

Meeting Purpose \_\_\_\_\_

\_\_\_\_\_

Room(s) Requested: \_\_\_\_\_

Will Food Be Served? \_\_\_\_\_

Number of People Expected to Attend: \_\_\_\_\_

Children Attending Yes or No: \_\_\_\_\_

Chaperone Names: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

\_\_\_\_\_

Date is open? \_\_\_\_\_

Rental Fee: \_\_\_\_\_

Deposit: \_\_\_\_\_

Balance: \_\_\_\_\_

### **Building Use Policies**

1. Facilities are available to non-profit organizations, community service agencies, or by individuals or families.
2. Building use must be approved by the Board of Trustees
3. Persons or groups using the facility will be liable for any damage resulting from their use.

**Note: Insurance Certificate Provided?**  Yes  No

I agree to comply with all LakeSide Fellowship policies and procedures for my group event.

**Requesting Group Representative:** \_\_\_\_\_

**LakeSide Representative:** \_\_\_\_\_

**Trustee Approval:** \_\_\_\_\_

Add to Calendar: \_\_\_\_\_