



Emmanuel Church
 14 Hope Street
 Ridgewood, NJ 07450
 Phone: 201-444-7300 • Fax: 201-444-7303
www.emmanuelridgewood.org

Payment Amount: _____

Date Received: _____

APPLICATION FOR USE OF CHURCH FACILITIES BY MEMBERS

Date submitted: _____

I/We hereby apply to the appropriate boards to use the sanctuary of Emmanuel Church, Ridgewood, NJ on the dates and the terms and conditions set forth herein:

Date of use: _____ Hours requested: _____

Name of applicant: _____

Address: _____

Phone: _____ Cell: _____

Are you applying for: Personal use ___ Community use ___ Other: _____

What is the proposed Activity? _____

Will this be one time use ___ multiple uses on the following dates: _____

Estimated number of attendees _____

Please be advised: Moving the Piano must be supervised by Church Staff. Fee of \$100 will be charged.

*Extra necessities: TV ___ VCR ___ DVD ___ Extension Cord ___ Projection Screen ___ Podium ___

*Tech Fee: \$150 (1st Three (3) hours, then \$30/hr thereafter) Microphone ___

Fee Schedule

<u>Facilities Requested</u>	<u>Approximate Capacity</u>	<u>Use Fee (donation appreciated)</u>	<u>Custodian Fee</u>
___ Sanctuary	250		\$100
___ Chapel	30		\$ 50
___ Heritage Hall (incl. Kitchen)	100		\$100
___ Library	20		\$ 25
___ Peace Lounge	100		\$100

Organist/Pianist (if needed) \$150

Terms and Conditions:

All of the facilities of Emmanuel Church are smoke-free and drug-free premises. Alcohol is permitted but a waiver must be signed and user obtains compliance with applicable rules, regulations, state laws and the host/caterer must provide evidence of liquor liability insurance or sign a waiver of liability.

User is responsible for restoration of church facilities to pre-use condition. Breakage or missing items will be the responsibility of the user.

One-half of room fee will be refunded if an event is cancelled after the event has been approved and calendared by the church.

I/We have read and agree to the above terms and conditions:

 Applicant Signature

 Date

 Applicant Signature

 Date

Comments/Special Requests:

Submitted to Deacons

Approved _____ Rejected _____

Signature _____ Date _____

Submitted to Trustees

Approved _____ Rejected _____

Signature _____ Date _____