

**Emmanuel Church** 14 Hope Street

Ridgewood, NJ 07450 Phone: 201-444-7300 • Fax: 201-444-7303

www.emmanuelridgewood.org

Payment Amount:
Date Received:

## <u>APPLICATION FOR USE OF CHURCH FACILITIES BY NON- MEMBERS</u>

	Date submitted:		
• 11 •	oppropriate boards to use the sene dates and the terms and co	•	hurch, Ridgewood, NJ
Date of use:	Hours requested:		
Name of applicant:			
Address:			
Phone:	Cell:		
Are you applying for: Personal use	e Community use	Other:	
What is the proposed Activity?			
Will this be one time use mu	altiple uses on the following da	tes:	
Estimated number of attendees Please be advised: Moving the Pia * Extra necessities: TV V * Tech Fee \$150(1st Three (3) ho *Organist/Pianist (if needed) \$250 Fee Schedule:	no must be supervised by CCCR DVD Extensours, then \$30/hr thereafter)	ion Cord Projection	_
Facilities Requested	Approximate Capacity	Use Fee	Custodian Fee
Sanctuary	250	\$400	\$100
Chapel	30	\$125	\$ 50
Heritage Hall (incl. Kitchen)	100	\$350	\$100
Library	20	\$50	\$ 25
Peace Lounge**	100	\$500	\$150
Please note: \$300 Deposit is du ** Peace lounge only-a \$200			
Terms and Conditions: All of the facilities of Emmanwaiver must be signed and use the host/caterer must provided User is responsible for restorable the responsibility of the use	er obtains compliance with a evidence of liquor liability i tion of church facilities to p	applicable rules, regulation nsurance or sign a waive	ons, state laws and r of liability.
One-half of room fee will be r calendared by the church.  No refund will be given, if yo		·	een approved and
I/We have read and agree to th	ne above terms and condition	is:	
Applicant Signature	Date	Applicant Signature	Date

Comments/Special Requests:			
Submitted to Deacons			
Approved	Rejected		
Signature		Date	
Submitted to Trustees			
Approved	Rejected		
Signature		Date	