

Building Use Request

Event or Group Coordinator/contact person: _____

Contact Information for Group Coordinator/contact person: _____

Email: _____

Event: _____

Location of Event: _____

Please circle doors used for the event:

East Fellowship Education Wing Family Life Center Sanctuary Door
Playground Office Trophy West Fellowship Hall

Time of Event: _____

Time Doors Need Opened: _____ Time Doors Need Closed: _____

Date: _____ Is this a recurring event: _____ For how long: _____

Mark if event is: For Profit _____ Non-Profit _____

Services with Fee (*Facility rental fee should be remitted within ten (10) days of use*):

Make checks payable to: St. John Lutheran Church, 1100 N. Main Street, Celina, OH 45822

Kitchen _____ Audio _____ Janitor Clean-up _____ Donation _____
Charge _____ Coffee _____

Not adhering to the Building Use Contract or the rules and regulations of St. John Lutheran Church may result in removal from the calendar. Please refer back to your Building Use Contract or contact the St. John office for any questions or concerns.

Please inform the church office if there is a change in schedule or cancellation.

Any secondary individuals that may be contacted in the event that the Group Coordinator cannot be reached (These people do not have authority to change information on the calendar permanently):

Additional information or details: _____

HOLD HARMLESS AGREEMENT:

I/We, _____ agree to indemnify and HOLD HARMLESS St. John Lutheran Church and their agents and employees from all liability, claims, demands, or costs, for or arising out of _____. Whether it be caused by the negligence of indemnitor or St. John Lutheran Church or either party's agents or employee, or otherwise.

Signature _____ Staff Signature _____ Date: _____