

FACILITY USE REQUEST FORM

Please return completed form to communications@gtlc.org as far in advance of the date requested as possible to confirm your reservation

1. _____ Date: _____
(Group or Individual requesting use)

2. Address: _____ Phone: _____

3. Date(s) Requested: _____ If recurring – Start Date _____ End Date _____

4. Time of Day: Begin: _____ End: _____

5. Member or regular attender who will be present: _____

6. I have access to the building (key) I will need access to the building

7. Facilities needed (please check all rooms you plan to use):

- Ministry Center
- Welcome Center
- Sanctuary
- Admin

Use Guidelines: Signature of this form indicates acceptance of all applicable fees and guidelines.

Please explain activity to be held: _____

Estimated number of people involved: _____

The person / organization requesting the use of Gateway Trinity Lutheran Church facilities hereby absolves the church, its pastors, leadership, members, or people of any liability for personal injury to any individual resulting from the use of the church facilities and agrees to be responsible for any property damage that results during the use of the facilities. Please report any damage to the church office promptly.

The group or individual using the facility is responsible for setup, cleanup, and return to normal setup of the facility. (See "Responsibilities after Building Use" document)

Signature of Responsible Party: _____ Date: _____

For office use only:

Approved by: _____ Date: _____