

Vermont Lutheran Church

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www.vermontlutheran.org

FACILITIES USE REQUEST

Date of Request _____

Name of Individual/Organization _____

Address of Individual/Organization _____

Responsible Individual using the facility _____

Telephone number/e-mail of responsible individual _____

Date and times you request use of our facilities _____

Areas/facilities to be used _____

Stated purpose of use _____

Estimated number of attendees _____

GUIDELINES FOR THE USE OF VERMONT LUTHERAN CHURCH FACILITIES

- The individual/organization needs to fill out the above form and submit to the Church Secretary in either hard copy or hard copy or electronic form prior to the requested date of use. The Church Secretary will review the calendar to ensure there are no schedule conflicts and notify the requestor as to approval or disapproval of the request. A copy of the approval will be provided to the designated "responsible individual" and the original will be maintained for church records.
- Related fees for use of facilities: As a non-profit organization, Vermont Lutheran Church is responsible for all costs of maintaining facilities (electricity, heat, janitorial, etc.) and as such must have users share these expenses. Free will offerings for the church's future ministry are welcome. The following is the fee schedule for use of our facilities:

Area to be used	Members	Non-Members
Fellowship Hall & Kitchen	\$0	\$350
Wedding (Sanctuary)	\$0	\$400 (entire facility)
(Pastor—recommended)	\$200	\$250
(Organist—recommended)	\$100	\$100
(Custodian-recommended)	\$50	\$50
(Secretary)		\$20
<i>The Gathering Place</i> <u>without</u> use of Fellowship Hall or Kitchen	\$0	\$50
<i>The Gathering Place</i> <u>including</u> use of Fellowship Hall and Kitchen	\$0	\$400
Funerals	\$0	\$400 (entire building)
(Pastor)	Honorarium	\$200
(Organist)	\$100	\$100
(Custodian)	\$50	\$50
(WELCA)		\$200

(Over)

3. THERE IS NO SMOKING ON ALL PREMISES OF THE CHURCH.
4. NO ALCOHOLIC BEVERAGES ARE ALLOWED IN THE CHURCH , FELLOWSHIP HALL OR GATHERINGPLACE.
5. All facilities of the church, to include the Sanctuary, the Fellowship Hall, the kitchen, the restrooms, and the Gathering Place allow for handicapped access. There is an elevator in the church proper and all buildings are barrier free.
6. The Church Sanctuary has a capacity of approximately 250 people, including access to the balcony. It is expected after use, all lights and fans will be turned off and heat turned down before exiting. The responsible individual for the group/organization must arrange for securing the key and returning the key upon completion of the event. Security of the building and the access keys will rest with the responsible individual/organization.
7. The Fellowship Hall and kitchen has a capacity of approximately 125 people. Kitchen facilities are modern and include refrigerator/freezer, convection oven, conventional oven, microwave and range. Food preparation islands and dish washing facilities are also available. It is expected that all utensils, dishes, etc. will be cleaned and returned to their proper storage after use. All trash must be removed and taken with you.
8. The Gathering Place can accommodate up to 64 people for a sit-down dinner and approximately 75 people for a meeting. This facility has a large gas log fireplace, keyboard, and multiple lighting options, making it highly desirable for any type of meeting or gathering. There are no water or restroom facilities in this building. There are no cooking facilities but the use of the church kitchen can be coordinated to serve food. In addition, there is a large, flat screen TV in this building with a DVD player than can be integrated with a computer projection system. The storeroom in this building is off limits to all but designated church members.
9. Any damage incurred to the buildings (Church, Fellowship Hall, kitchen, restrooms and/or the Gathering Place will be reported to the church secretary and will be the responsibility of the using individual and/or organization.
10. I have reviewed the entire form and agree with the items 1—9 and the fee schedule. Please place a mark by this item when you feel all questions have been answered.

Date _____ Signature of Applicant _____

Name of Organization _____

Approved _____ Date _____ Signature of Secretary _____

Disapproved _____ Date _____ Reason for Disapproval _____

Signature of Council President _____

Date _____

Total monies collected from individual/organization using the facilities \$ _____ (check) (cash)

(Please make check out to the Vermont Lutheran Church Treasurer)

Received by _____ Date _____