

Facility/Vehicle Use Request

Requested by: _____ TECC Ministry TECC Member (Facility or Vehicle use)
 Outside Group (Facility use only)

Ministry/Organization: _____

Address: _____ City/State/ZIP _____

Telephone: (____) _____ E-mail: _____

What is your intended use of the facility or vehicle? _____

Date(s) of Event: _____ Time: _____ am/pm to _____ am/pm Number Attending: _____

One time only Weekly Monthly Other: _____

Note: If your group will have multiple meeting dates, please supply the office with the dates from Sept.-June.

FACILITY REQUESTS

ROOMS REQUESTED:

- | | | | |
|---|--|--------------------------------------|---|
| <input type="checkbox"/> Kitchen | <input type="checkbox"/> Sanctuary | <input type="checkbox"/> New Narthex | <input type="checkbox"/> Other Rooms: _____ |
| <input type="checkbox"/> Community Room | <input type="checkbox"/> Middle School | <input type="checkbox"/> Old Narthex | _____ |
| <input type="checkbox"/> Library | <input type="checkbox"/> High School | <input type="checkbox"/> Nursery | _____ |

SET UP REQUIREMENTS:

- Set-up/Preparation Time: Prior Day (specify time: _____ am/pm to _____ am/pm)
 Same Day (include set-up time in event time above)
 Not needed

Seating for _____ people at rectangular tables at round tables theater style

For specific requests, please diagram the set up of your meeting area and staple to this form.

- Equipment Needs: TV with DVD/VCR Overhead Projector Projector
 Piano Podium Microphone

CUSTODIAL SERVICES:

- I am requesting the services of a custodian and agree to pay the associated fees, if any.
 I will be responsible for returning the spaces I use to the condition and setting in which I found them upon arrival.

VEHICLE REQUESTS-TECC Ministry & Members only

VEHICLE(S) NEEDED: Bus without Lift Bus with Lift Passenger Van Large Trailer

Note: Drivers must be approved by Thornapple and should plan to pick up keys during office hours.

NOTE: Please complete Indemnity Agreement on page 2.

Applicant Signature: _____ Date: _____

OFFICE USE ONLY

Approved by: _____ Date: _____

Fee to be charged: Yes No Amount: \$ _____

Keys Issued: _____ By: _____

Keys Returned: _____ By: _____

Indemnity Agreement

Agreement made this date between Thornapple Evangelical Covenant Church (hereinafter referred to as TECC”) and _____ (hereinafter referred to as “Indemnitor”) whereby Indemnitor shall indemnify and save harmless TECC against any and all claims, demands, causes of action, suits, or judgments, including attorneys’ fees, costs and expenses incurred in connection with such matters, for death or injuries to persons or for loss of or damage to property, however caused, arising out of or in connection with the use and occupancy of TECC premises by Indemnitor, Indemnitor’s agents, employees, or invitees, as described more particularly below. In the event of such claims made or suits filed, TECC shall give Indemnitor prompt written notice thereof, and Indemnitor shall resist or defend the action or processing with counsel satisfactory to TECC.

Intended use of TECC premises:

Date and hours of intended use: _____

Rooms to be used:

Anticipated number of persons: _____

Organization (Indemnitor): _____

By: _____ Date: _____

Thornapple Evangelical Covenant Church

By: _____ Date: _____

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Church Use Only:

Date Received: _____ *Check Number:* _____ *Amount \$* _____

Account Designation: _____

Date Approved by Facilities Administrator: _____

R 9/23/08