## **Facility Use Form**

## First United Methodist Church of Lebanon TN, Inc.

415 W. Main St., Lebanon TN 37087 | 615-444-3315 | lebanonfumc.com

This form must be signed and approved for your event to appear on the church calendar. Priority for use of facilities will be given to Lebanon FUMC groups. Lebanon FUMC groups using rooms on a regular basis may complete one form to keep on file. No alcohol or controlled substances are allowed on church grounds. All church buildings are smoke-free and vaping-free. \*Kitchen use requires completion of a separate Kitchen Use Requirements form.

Name of Event:	
Group Times Needed (allow for setup and tear-down)	
Presence on site related to facility use on Sundays is	s limited to 1:00 PM and after ONLY. No exceptions.
Contact person:	Mobile Phone#
Area(s) and Equipment Used: (additiona	al fees may apply, depending on event)
Hesson Hall Main Kitchen Sanctuary (	Chapel Parlor Library JOY Room
Gym FLC Lobby Room 130 Ro	om 132 Thackston Room Pavilion
Long tables Round tables Chairs Sp	ports Equipment (extra \$50 Deposit)
Users are responsible for any damage to church prop harmless Lebanon FUMC for	, •
Facility keys: User is responsible for coming in during and to return it the following w	, , ,
<b>Fees/deposit:</b> Use of all Lebanon FUMC facilities re equipment (wedding fees may differ). Once the Covenant items (below) have been completed IN	event is over and the staff has confirmed that the
Covenant (Please	e read and sign.)
I acknowledge this facility is to be given utmost care in as good or better condition than found. After the ex	· · · · · · · · · · · · · · · · · · ·
<ol> <li>Dispose of all trash and recyclables in dumpster/bins</li> <li>Clean all table surfaces, counters, and floors</li> <li>Return all church-owned supplies/equipment to their</li> <li>Return all chairs and tables to their storage areas and</li> <li>Remove ALL decorations and non-church items from last day of the event)</li> <li>Comply with the Kitchen Use Requirements form list in</li> <li>Return the facility key to the office</li> </ol>	proper storage places d/or original positions the facility (staff will dispose of items left 5 days after the
I will be the accountable person for this even	t. I have read the covenant and will comply.

Date \_\_\_\_\_

Signature \_\_\_\_\_