

APPLICATION FOR USE OF FACILITIES

**First Congregational Church
6 Kirby Road - P.O. Box 1285
Washington, CT 06793**

Phone: 860-868-0569

Fax: 860-868-8074

Website: www.FirstChurchWashingtonCT.org

Email: admin@firstchurchwashingtonct.org

Room(s) Requested

_____ Meeting House

_____ The Green

Parish House (Check specific room/rooms below.)

_____ Wersebe Hall

_____ Youth Room

_____ Kitchen

_____ Upstairs Classroom

_____ Parlor

_____ Nursery

Name of Applicant _____ Email: _____

Address _____

Home Phone _____ Work Phone _____

Organization Using Facilities (if applicable) _____

Address (If Different than Above) _____

Business Phone _____ Business Fax _____

Is your group a non-profit organization? Yes No (Please circle one.)

Will participants pay a fee to participate in your program or event? Yes No

Number of participants expected _____

IF APPLYING FOR A SINGLE EVENT OR SEVERAL EVENTS IN THE SAME MONTH, PLEASE COMPLETE SECTION A. IF APPLYING FOR REGULAR USE OVER A PERIOD OF WEEKS OR MONTHS, COMPLETE SECTION B.

Section A

1. Date Requested _____ Program/Event _____

Setup Time _____ Starting Time _____ Ending Time _____

2. Date Requested _____ Program/Event _____

Setup Time _____ Starting Time _____ Ending Time _____

3. Date Requested _____ Program/Event _____

Setup Time _____ Starting Time _____ Ending Time _____

Section B

Day of the Week _____ Setup Time _____

First Meeting Date _____ Starting Time _____

Last Meeting Date _____ Ending Time _____

**All non-church groups using church facilities must provide a certificate of insurance. See attached guidelines.
(Over, please)**

_____ A certificate of insurance is attached to this application.

_____ A certificate of insurance will be mailed within one week by the sponsoring organization.

Insurance Company _____ Policy # _____

I have read and do hereby agree to abide by the printed "Guidelines for Use of Facilities".

_____ (Signature)

_____ (Date)

Facility Use Charges

Please note the amount under "Total Fees Due" at the bottom of this page.

See pricing schedule (on website) for current amounts or verify with the church office.

All fees are due no later than two weeks in advance of your program/event.

Please make check payable to First Congregational Church.

FOR OFFICE USE ONLY

Date Application Received _____

Date Insurance Certificate Received _____

Application Approved By _____

Room Use Fee _____

Piano Tuning _____

Pastor Honorarium _____

Sexton Honorarium _____

Music Director Honorarium _____

Total Fees Due _____

Deposit Amount: _____ Date Paid _____ Check # _____

Balance/Total: _____ Date Paid: _____ Check # _____