St. John's Sunshine Coast United Church

Facility Use Agreement *(please print)*

Event:	**Date of Event:**
	Time:
Booking on behalf of: (Name of Organization / Club / Group)	**Prep Time:**
Contact Name:	**End Time:**
Address:	**Phone:**
	Cell:
Email:	

Space Requirements & Fees:

☐ Sanctuary (events up to 4 hrs) @ $150 .....$_____
☐ Sanctuary @ $45 per hour .....$_____
☐ Piano/Organ fee $25 .....$_____
☐ Lower Hall @ $25 per hour (no kitchen) .....$_____
☐ Kitchen @ $15 per hour in addition to Lower Hall booking .....$_____
☐ Lower Tower @ $20 per hour .....$_____
☐ Ross Armstrong Room @ $20 per hour .....$_____
☐ Set-up / Take down fee $25 .....$_____
☐ Other: .....$_____

TOTAL OWING: $_____

Alcohol: ☐ No ☐ Yes License & approval by St. John's Church Board required

Liability Insurance: All Users must have third party liability insurance. Groups and those persons participating therein agree that there is no liability on the part of St. John's Sunshine Coast United Church as to suitability or condition of the premises and that they use these premises at their own risk. The group and its members will indemnify St. John's Sunshine Coast United Church and hold it harmless for any legal liability, costs, or damages for bodily injury, harm to property or death of any person or persons. The group and/or participants also agree to pay for any damages done to St. John's Sunshine Coast United Church property caused by them during their use of said property, excepting always, liability arising out of the independent negligent acts of the Property Owner. You are required to provide St. John's Sunshine Coast United Church with a copy of your third party liability insurance certificate.

Liability Insurance: ☐ Photocopy provided for St. John's ☐ Copy of Insurance still to come

Damage Deposit $100 : ☐ **Key Deposit $20 :** ☐ Separate cheque / payment to be held for return after booking.	
Total Fees Received:	

I/We have read, understand and agree to abide by the policies as set forth by St. John's Sunshine Coast United Church for the use of this facility. I/We will leave the premises in good order.

Signature of User: Office Administrator:

Office Use Only: ☐ Event Calendar ☐ Liability Insurance Form ☐ Deposit Cheque

Revised 2021.07