

HOLY TRINITY LUTHERAN CHURCH

4275 Lincoln Way W, Massillon, OH 44647 ● 330-832-5263 www.htmassillon.com ● Email: htlc@sssnet.com

MEMBER • FACILITY USAGE FORM

Name of Person Booking Event:	Phone:
Address:	Cell Phone:
City:	Zip Code/State:
Email:	Type of Function:
Name of Contact (if different than above)	Phone:
Email:	Cell Phone:
Date Requested:	Event Start Time:AM
Time(s) Required (set up and clean up times	must_ be included in the hours)
From:□AM TO:□AM □PM □PM	Estimated Number Attending Event
Will alcohol be served? ☐ YES ☐ NO	
If YES to <u>alcohol being served</u> , you must obtain Secu	rity. We will provide you with contact information to schedule.
NOTE:	

Events where alcohol is being sold and or gambling is included must complete the Community Facility Rental Form.

ITEM/HOURS	FACILITY or SERVICE	RENTAL FEE	TOTAL
	Deposit - Community Center - Please provide separate check	\$50.00	
	Deposit - Fellowship Hall/Pavilion - Please provide separate check	No Charge	
	Holiday Booking Fee - see Facility Usage Guide for list	\$50.00	
	Community Center - Birthday Party (13 & younger) (4 hours)	\$60.00	
	Community Center—Birthday Party (13 & younger) additional hours	\$15.00 per hour	
	Community Center - Social Event (4 hours)	\$100.00	
	Community Center - Social Event - Additional hours	\$25.00 per hour	
	Community Center - Social Event (4 hours) > 150 Chairs	\$150.00	
	Community Center - Athletic Event (1 hour)	\$20.00	
	Community Center - Athletic Event - Additional hours	\$10.00	
	Community Center Kitchen	\$50.00	
	Fellowship Hall (1 hour)	Donation	
	Fellowship Hall - Additional hours	Donation	
	Fellowship Hall—Set up/Tear Down Fee	\$30.00	
	Conference Room/Rooms	No Charge	
	Pavilion	No Charge	
	Pavilion with Fellowship Hall Kitchen/Bathroom Use	Donation	
	COVID Cleaning Fee		\$25.00
		TOTAL	

Furniture requirements: (please indicate number required)

6' round tables and 8' rectangular tables seat 8 people, 3 diagrams are available for set up of the Fellowship Hall. Set up requirements **must** be turned in one week prior to the event. Tables must be covered while in use. Please do not drag tables across the floor when moving them.

Quantity Quantity Available		Description
	25	Table Round - 6'
	22	Table Rectangle - 8'
	5	Table Rectangle - 6'
	325	Chairs

				,	
members, or r	members of any li esponsible for an	ability for persona	l injury to any i	rch facilities hereby absolves the church, its pastor, counc ndividual resulting from the use of the church facilities an ring the use of the facilities. Please report any damages t	d
	= -	s responsible for cl ondition. (See Facil	· ·	ll of trash, decorations and all food items plus making sur ures)	e the
-	or the Community days prior to eve		this form by s	eparate check. Remaining fees for the Community Center	are
Signature on t	his form accepts	all fees, and Policie	s and Procedu	res in the Facility Usage Guide	
Signature of P	Person Booking Ev	vent			
For Office Use Deposit Receiv	•	ge Payment Receive	ed □ Of	her 🗆	-
Approved By: (Pastor or Council President)			Date		
Approved By: (Building Manager)					
CC:					
Calendar	Custodian	Maintenance	Pastor	Other:	

Rev. 7/2020 Page 2 of 2