



Rental Application

APPLICATION DATE: _____
Day Month Year

APPLICANT: _____

CONTACT NAME: _____

CONTACT PHONE: _____ EMAIL _____

ALTERNATE CONTACT: _____

ALTERNATE PHONE: _____ EMAIL _____

TYPE OF EVENT: _____

DATE REQUESTED: _____
Day Month Year

TIME REQUESTED: FROM _____ am / pm TO _____ am / pm

ESTIMATED NUMBER OF ATTENDEES: _____

PLEASE INDICATE IF APPLICABLE: __ Cornerstone member __ Non-profit organization *

SPECIAL SET UP REQUIREMENTS: _____

ITEM	RATES	HOURS	COST	PAYMENT METHOD
Upstairs Sanctuary	\$100 / hour			
Downstairs Hall	\$50/hour			
Media Tech	\$25/hour			

Applicant Name (printed) _____

Applicant Signature _____

The section below is for administrative use only. Please do not write below this line.

- \$50 Booking Deposit submitted _____ Date: _____
- 50% Damage Deposit submitted _____ Date: _____
- Balance of payment received _____ Date: _____
- Insurance Certificate received _____ Date: _____
- Copy of government issued I. D. ____