

Application for single use of 1st Christian Church of San Jose

Name of person or group using _____ Dates of Use _____

Name of person responsible for this event _____ Phone _____

Address of group or person _____

Purpose of Use _____

Attendance expected _____ Time for event _____ Cars Expected _____

Group exemption # _____ Liability _____
provide a copy of insurance

Rules

No Alcohol

Rental hours are between 10am and 10 pm

No Loud music or microphone (speakers) --above 90 decibels

Kitchen: Cooking is not allowed. Food may brought in and heated.

Coffee pot ok.

No styrofoam containers: you provide (for your event) paper plates, cups and plastic utensils.

An off-duty officer must be provided if your event is for youths 18 or younger.

For more than 50 youths--you must hire two officers.

Consequence

If any group behaves inappropriately, the manager has the authority to end the event early.

Initials required

_____ I and/or the requesting group will hold First Christian Church harmless for an accident or injury arising from the use of this facility

_____ I understand that payment (and evidence of liability coverage, if appropriate) must be provided prior to use of the facility.

_____ I have paid a 50% deposit upon making the reservation (unless waived)

_____ I have supplied off-duty officers (if group is under 18)

_____ I have read and agreed to the rules and regulations for use (where applicable)

Special Arraingment notes

_____ Agreed to by (initials of the Moderator, Pastor, or member of the board)

Arraingment: _____

Thank you for thinking of First Christian Church for your event needs.

First Christian Church (Disciples of Christ) San Jose
Single Use Fee Schedule.

Mary Dean Miller Fellowship Hall

ROOM	TIME	RATE	DONATION
Fellowship Hall (250 max capacity)	2 hour min>> Then, per hr>	\$400.00 + \$100.00/hr	
		Sub Totals	\$

Sanctuary

ROOM	TIME	RATE	DONATION
Sanctuary/Transept (270 max capacity)	2 hour min>> Then, Per Hr>	\$500.00 + \$50.00/hr	
Classroom per use	1 hour min	\$50.00/hr	
		Sub Total	\$

OTHER FEES – ALL RENTALS	TIME	RATE	DONATION
On site Facility Manager	Per event	\$50.00 - \$100 -	
For groups of 125 or more, add %20 to hourly subtotal			
		Sub Total	\$
		Total	\$

NOTE:

Your **event is not confirmed** until we a deposit of %50 your total rental fee.
The balance is due no later than 4 days BEFORE your event.

Rentor: _____ Date: _____

Confirmed by _____-Date: _____