

Facility Rental Agreement



Please use this application to submit your rental request for The Grace Christian Fellowship facility. Note that a 14 day approval process is required prior to completing an application. Thank you for considering us for your event.

CONTACT INFORMATION

DATE: _____

CONTACT NAME: _____	TITLE: _____	
CELL: _____	DAY PHONE: _____	
EMAIL: _____	WEBSITE: (if applicable) _____	
ADDRESS: _____	CITY, PROVINCE: _____	POSTAL CODE: _____
ALTERNATE CONTACT: _____	PHONE: _____	

EVENT INFORMATION

DATE(S) REQUESTED: _____	START TIME: _____	END TIME: _____
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EVENT: _____	GROUP NAME: _____
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PLEASE ATTACH ANY INFORMATION WHICH WILL ASSIST IN DESCRIBING YOUR ORGANIZATION AND THE EVENT.

ESTIMATED ATTENDANCE: _____

IS YOUR GROUP A NON-PROFIT, IF SO PLEASE PROVIDE PROOF? YES NO # _____

DECORATING THE HALL? YES, IF SO ALL DECORATING MUST BE DONE IN KEEPING WITH THE POLICIES OF THE CHURCH.

ARE YOU THINKING ABOUT SERVING ALCOHOL: YES NO If yes, what did you have in mind? _____

DO YOU REGULARLY ATTEND GRACE CHRISTIAN FELLOWSHIP?

YES NO If yes, please inquire about the member rate.

ROOM(S) & RATES*	(Chairs & Circle Tables Included)	Non-Member Rate
<input type="checkbox"/> ENTIRE FACILITY		\$400/day*
<input type="checkbox"/> SANCTUARY/THEATRE 50' x 47' (200 guests)		\$100/half day* **
<input type="checkbox"/> If requiring audio, Grace Sound Tech is an additional \$20/hr <input type="checkbox"/> Will you need stage cleared?		
<input type="checkbox"/> FELLOWSHIP HALL 33' x 40' (100 guests)		\$100/half day* **
<input type="checkbox"/> KITCHEN 16' x 23'	included in sanctuary & fellowship hall rental	
<input type="checkbox"/> MEETING ROOM 27" x 14'		\$25*
<input type="checkbox"/> BOARD ROOM 13' x 14'		\$25*
<input type="checkbox"/> LONG TERM RENTAL OF _____	Rate Negotiable, Based on Individual Request*	

* Rentals require a Key Deposit (\$15), Damage/Custodial Deposit (200% of room rental) & Proof of Insurance. **Hourly Rate Negotiable.

RENTAL POLICIES

- Checking the desired date with the general office is the first step and the specific responsibility of the persons seeking use of the facilities. All arrangements are to be made and confirmed through the church office.
- The balance of all fees is due 2 days prior to the date of the event.
- A key deposit, in the amount specified is required at the time of key pick-up and is refunded upon return.
- Church personnel must operate the sound system unless a qualified technician is approved in writing, sound-tech will be an additional \$20/hr.
- Renters are responsible for all breakage or damage of any equipment on church property. Please report any damage to the church office.
- A damage/custodial deposit, of 200% of basic rental fee is required at the time of key pick-up. This deposit is returned provided a custodian is not required and no damage has occurred. A deduction may be charged against this deposit if custodial services or repairs are required.
- The church has a NO SMOKING policy.
- Renters for meetings and social events must respect other groups that may be using the building at the same time.
- Every effort will be made to avoid concurrent scheduling of groups with conflicting uses.
- All wedding/union blessings and funeral/memorials services not using the Grace Minister, will require prior approval by the Grace Minister and/or Elder(s).
- NO LIGHTING CANDLES unless specifically agreed to and noted on this rental agreement. If you are permitted to use candles, do not leave them unattended.
- All decorations to be affixed with low-tack painter's tape. Renter is responsible to remove all items/decorations brought in by renter at the end of event/rental.
- We request for your safety that you please note the locations of the fire extinguishers, first aid and exits.
- Children must be supervised at all times.
- DISHWASHING is the responsibility of the renter. Use of kitchen dishes and utensils are permitted. Kitchen must be left as found.
- ALCOHOLIC BEVERAGES may not be served unless special permission has been granted and may not be served without a liquor license obtained by the renter from the LCBO and provided to GCF two days before event.
- Long-term rentals must have board approval. Long-term rental fees are negotiable and determined on an individual basis.
- The use, movement or removal of church furnishings is limited as follows:
 - Use of or movement of church musical instruments is NOT ALLOWED without written approval from the Music Director. Any movement of instruments must be completed by a qualified instrument mover, who will also return the instruments to their original position following use; any tuning or repairs required as a result of the moving of the instruments becomes the responsibility of the renting organization or group.
- It is advisable that all user groups complete a final check of the facility before they vacate the building. i.e. lights.

I have read and agree to the rental policies listed above.

SIGNATURE _____

DATE _____

LIABILITY INSURANCE

Facility users must provide Outside User Group Liability Insurance of at least \$2,000,000 no later than 10 days prior to the scheduled start time or make other arrangements with Grace regarding liability coverage. Additional information about insurance options will be provided. Easy online coverage can be accessed at www.robertsonhall.com/access or call 1.800.640.0933 or email access@robertsonhall.com.

ACCESS POLICY

Grace Christian Fellowship reserves the right to grant access to its facilities to those groups or individuals whose activities are in harmony with our mission and values.

OUR MISSION

A Family on a Mission: We are a vibrant Christian community in the heart of Centre Wellington.

FEES & CHECK LIST (CREDIT CARDS ACCEPTED)

PROOF OF INSURANCE:
Company _____ Policy #: _____

ALCOHOL: LCBO PERMIT # _____

Rental Fee.....\$ _____

Damage Deposit (200% of rental fee)\$ _____
Pre-Authorized Hold on Credit card, returned if no damage) 15.00

Key Deposit Fee.....\$ _____

Sound Tech Fee.....\$20/hr x ___ hr =\$ _____

Paid Staff\$20/hr x ___ hr =\$ _____
Supervisor or clear stage/instruments/setup/takedown help

TOTAL RENTAL FEES Due.....\$ _____
(Due 2 DAYS prior to event date)

DAMAGE INSPECTION AT CHECKOUT _____

CUSTODIAN (if not cleaned) ___hr(s) X \$20/hr.....\$ _____

DAMAGE & KEY DEPOSIT Returned\$ _____

Invoice # _____ Date Sent: _____

GRACE CHRISTIAN FELLOWSHIP

35 Farley Rd, Fergus, ON N1M 2W3 | 519.787.1978

DATE RECEIVED: _____

RENTAL COORDINATOR: _____

PASTORS APPROVAL: _____

DATE: _____

ELDER'S APPROVAL: _____

DATE: _____

OFFICE USE ONLY

STAFF NOTES:
