



General Facility Usage Request Form

Complete both sides of this form and return it to the Mission Covenant Church (MCC) office with applicable fees to secure the requested date(s)

Please Print

Contact Name

Day(s)/Date(s) Requested

Group/Individual Making Request

From _____ To _____
Specific Time Facility is Needed

Address

From _____ To _____
Actual Time of Event/Activity

City/State/Zip

Phone and/or Email Where You May Be Reached

Description of Event/Activity

Specific Room(s) Requested

- | | | |
|--|---|--------------------------------------|
| <input type="checkbox"/> Classroom(s) Number Requested _____ | <input type="checkbox"/> Showers | <input type="checkbox"/> Library |
| <input type="checkbox"/> Fellowship Hall | <input type="checkbox"/> Stage | <input type="checkbox"/> Sanctuary |
| <input type="checkbox"/> Gym | <input type="checkbox"/> Food Prep Kitchen* | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Climbing Wall | <input type="checkbox"/> Fellowship Hall Kitchen* | |

*If a kitchen will be used for cooking or food preparation, a Serve Safe Certified Kitchen Supervisor must be present.
 *If using a kitchen, which Serve Safe Certified Kitchen Supervisor or Host will be on site? _____
 *If help is needed to find a Serve Safe Certified Kitchen Supervisor, please call the MCC office, 715-364-2738.
 *If food is being served that has been prepared off-site a Serve Safe Certified Kitchen Supervisor does not need to be appointed from Mission Covenant Church.

Detailed Set Up and/or Resources Requested from MCC

(over)

Agreement for Use

All regular MCC and MCC-sponsored activities shall have priority in scheduling the use of the facility. Facility fees will be charged in accordance with the category of the group/individual making the request. Fees may be adjusted/waived at the discretion of the Facility Usage Coordinator, Executive Pastor, or Council.

It is understood that

- The designated adult MCC host is required to be present on site during the entire event/activity.
- Neither MCC nor its staff/volunteers are liable for injuries incurred during the use of the facility, nor are they responsible for lost or stolen articles.
- The adult host assumes responsibility for the care of the facility. If any damages are incurred, the leader/host/organization will be held financially responsible to compensate MCC.
- If the facility is used for a rummage sale, all items that were not sold must be removed from the facility before the host may leave.
- If liability insurance is required, please attach documentation to this form.
- For Friday or Saturday events using the MMC that the host will make arrangements to have the chairs set up for Sunday Services.
- The adult host assumes responsibility for supervising children during the event.
- The adult host has read and agrees to abide by the Facility Usage Policy of Mission Covenant Church.

Signature

Date

Refundable Cleaning/Damage Deposit

Gym	\$100.00
Fellowship Hall	\$ 20.00
Classrooms	\$ 20.00 each
Serving Kitchen	\$100.00
Food Service Kitchen	\$100.00
Sanctuary	\$ 75.00

required, the fee is \$20 per hour. These amounts will be deducted from the Refundable Damage Deposit.

Miscellaneous Services

Sound Tech	\$20.00 per hour
Kitchen Supervisor	\$20.00 per hour

Custodial Services

For Sunday–Friday daytime events/activities, no custodial fees will be assessed if the group/individual assists with clean up after the event/activity.

A donation to cover the costs of utilities and supplies is appreciated.

For Friday evening and Saturday events/activities, if custodial services are required to ensure the facility is clean and ready for the weekend worship services, the custodial fee is a minimum of \$70 for up to two hours. If additional cleaning is

If MCC’s disposable plates, cups, napkins, etc. are used, please replace them.

Host _____ Alternate _____

Name of Person with Key responsible to open facility for event _____

For Office Use Only

Date/Time Received _____

Approved by _____ Date _____

Needed Personnel Assigned and Notified

Name _____ Title _____ Date _____

Name _____ Title _____ Date _____

- Insurance Documentation Required
- Approved—Total Amount Due: \$ _____
- Denied

- Insurance Documentation Received
- Fees Waived
- Host will Arrange for Chair Set-up in MMC