SOLON UNITED METHODIST CHURCH (SUMC) SUMC and Family Life Center Reservation Form



| Name of Individual or Organization: | | | |
|---|---|--|--|
| Contact person: | | | |
| Address: | Cell Phone: | | |
| | | | |
| Date(s) Requested: | Event Time(s): | | |
| End Date (if applicable): | Setup/Tear Down Time(s): | | |
| This event is () one-time () ongoing (e.g. r | monthly, weekly): | | |
| Description of Event/Activity to be held: | | | |
| Community Use of Solon United Methodist Church are We believe that the Solon United Methodist Church are We invite members and others in the community to a members, local nonprofit entities, and individuals prowill be permitted if it does not interfere with or disrupt to use SUMC and/or FLC must fill out this reservation from | n/Kitchen key # ure the return of keys upon completion of the reservation time period) | | |
| · · · · · · · · · · · · · · · · · · · | nd events, and then not-for-profit activities and organizations. SUMC may, on a grams which are compatible with the mission and ministry of SUMC. | | |
| Your reservation is not complete until both parties has SUMC church offices accompanied by agreed-upon de | ve signed this document, and a fully-executed copy has been returned to the eposits. | | |
| For Office Use Only | | | |
| Reservation () Approved () Not Approved | Date Approved: On Calendar (Y/N) By whom: | | |
| Key # Checked Out: Received | l \$50 Deposit (Y/N) ()Cash ()Check # | | |
| Date Keys Returned: \$50 Key | Deposit Returned () Yes To whom: | | |
| Payment Received () Cash () Check # | Date Received: | | |
| Notes: | | | |

Deposits and Rental Rates:

- 1. Fellowship Hall and Family Life Center:
 - Rental rate is \$40 per hour for sports practices and ongoing events. Advance payment for the first month is required and subsequent months due by the 5th of each month.
 - Rental for one- time events (ie. Birthday parties) is \$50, advance payment is required and includes up to three hours, additional time can be added at \$10/hour.
 - A refundable \$50 deposit check is required if a key is needed for access. Keys are to be returned promptly upon completion of your event(s).
 - All facilities must be reserved through the Office Administrator in advance of the event.

General Building Use Rules:

- All uses must be compatible with the mission and ministry of SUMC.
- All uses must be in compliance with all federal, state and local law.
- No tobacco, alcohol, inappropriate use of internet, or gambling is allowed.
- All minors under 18 must be fully supervised.
- Activities and attendees must remain in the area of the building which has been reserved.
- The individual signing this Reservation Form is responsible for monitoring traffic in the building and parking lot, as well as supervising the attendees in the program they sponsor.
- All individuals and groups are expected to return the space to the same (or better) condition than it was found. This
 includes removing trash, sweeping the floor, turning lights off AND complying to the SUMC COVID Cleaning Protocol.
- Fire exits will not be blocked at any time.
- No street or field shoes may be worn inside the FLC gym.
- No hard balls (baseballs, softballs) will be used in the FLC gym.
- All activities must end no later than 9:00 pm.
- No refunds due to inclement weather.
- If a group or individual creates consistent infractions of the rules for building use, reservation requests may be denied.

Damage to Premises:

Any damage done to church property must be reported immediately to the Office Administrator, no later than the following day. The requestor and/or requesting organization will be responsible for the full cost of repairs or replacement of property, fixtures or equipment, as deemed necessary by the SUMC to return the premises to its original condition.

Indemnification:

The requestor, including heirs, administrators, executors, and/or assigns, agrees to assume all risk of loss and to release SUMC, its officers, employees, and agents from and against any and all claims, liabilities, damages, losses, costs, or expenses of whatever nature or character for all injuries, damages resulting from or arising out of use of the SUMC buildings and facilities.

COVID Addendum:

| | s, executors, and/or assign | | |
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| Signature, SUMC Office Administrator | Date | | |
|--------------------------------------|-----------------------------------|--|--|
| Printed name: | Organization Name, if applicable: | | |
| Signature, Requestor | | | |