

BAKER MEMORIAL UNITED METHODIST CHURCH
(Phone: 630/584-6680 fax: 630/584-6712)
REQUEST FOR USAGE OF THE CHURCH
(See backside for DONATION FEES & POLICIES)

APPLICATION (Today's) DATE _____

CHURCH EVENT/GROUP _____ NON-CHURCH EVENT * _____

IS THIS A: Meeting _____ Recital/Concert _____ Lessons _____ Reception _____ Other (describe) _____

EVENT/GROUP NAME _____

ADDRESS _____ PHONE _____

CONTACT PERSON _____ E-MAIL _____

WILL THIS OCCUR ONCE _____ WEEKLY _____ MONTHLY _____ OTHER(describe) _____

WEEKDAY & DATE (If event meets more than once, please indicate each day and date.)

What time should the room(s) be available? _____ What time does event start? _____

What time will the last person leave the building? _____ Any attendees under age 18? Yes ___ No ___

ROOM(S) REQUESTED: Sanctuary _____ Chapel _____ Baker Hall _____ Library _____

Parlor _____ Conf. Room _____ Nursery _____ Wiley Hall _____ Kitchen _____

Youth Room _____ Classroom(s) _____ Other (describe) _____

SET UP: A copy of this sheet will be submitted to Mike if it is for a church event/group. *Mike, if available and for a fee, will do outside groups/events; however, contact must be made directly with him (ask office for phone number). Please attach another sheet if there are further instructions.

Tables - How Many _____ Chairs - How Many _____ Other (describe) _____

PERSON(S) RESPONSIBLE FOR:

Set up _____ Clean up _____ Opening & Closing _____

FOR OFFICE USE ONLY

CHECKLIST:

1. Check the church calendars for room(s) availability.
2. If already booked, check with other person/group to see if something can be worked out.
3. Verify above that all rooms needed are checked.
4. Give Mike (Alpha Maintenance) a copy of this form if event/group is church related.
5. * If event is not church related, then Mike charges a fee; his fee depends on what is involved and must be paid directly to him.
6. 9 Donation Fee paid: \$ _____ Duration: _____
7. 9 Proof of Insurance provided.
8. Requestor has read and understands Baker Memorial United Methodist Church's Safe Sanctuary Policy

Name _____ Date _____

For Non-Church Events/Groups - OK=d by _____ Date _____

Date Placed on Paper Calendar _____ by _____ Date Placed on Computer Calendar _____ by _____

Building Usage Donation Schedule
January 1, 2006

<u>Room</u>	<u>Half Day (up to 4 hours)</u>	<u>Full Day (more than 4 hours)</u>
Sanctuary	\$200	\$400
Chapel	\$150	\$150
Baker Hall	\$100	\$200
Classroom/Library	\$ 25	\$ 50
Parlor/Wiley Hall	\$ 75	\$150

1. All groups using the building will abide by the church's Safe Child Policy.
2. These donations apply to all for-profit and non-profit individuals, groups and organizations.
3. The donation schedule does not apply to activities conducted by the staff members of Baker Memorial UMC.
4. Any activities considered by the staff to be extensions of the ministry of the church are exempted from the donation schedule.

Baker Memorial United Methodist Church – Finance Committee

January 1, 2006

To Whom It May Concern:

Subject: Baker Memorial UMC Building Use Policy

Please be advised that effective January 1, 2006 we will be changing our building-use policies to reflect our commitment to the safety of children.

Our new policy shall be as follows:

If children under eighteen years of age will be at your activity, we require two adults who are at least 18 years old and five years older than the child(ren) to be in the room at all times.

We also require a certificate of liability insurance to be on file with the church office.

Questions may be addressed to the Board of Trustees through the Church Office at (630) 584-6680.

Thank you for your cooperation.

Baker Memorial United Methodist Church Board of Trustees