

APPLICATION FOR USE OF WILMOT UNITED CHURCH FACILITIES

1. Name of organization applying for use of the facility:

2. Contact Person: (Please print)
_____ Phone: _____

Address: _____
Postal Code _____ Email: _____

3. Date(s) of use: _____

4. Time of use (include time needed to set up before and clean up after the event)

5. Number of persons involved: _____

6. Type of Activity: _____

7. Non-Profit or Charitable Organization? Yes or No
50% reduction in room rates for Non-Profit or Charitable Groups

8. Facilities requested: Fee *
() Sanctuary \$75 per hour plus \$13 per hour for custodian
() Gymnasium \$40 per hour plus \$13 per hour for custodian
() Kitchen \$40 per hour plus \$13 per hour for custodian
() Meeting Rooms \$25 per hour plus \$13 per hour for custodian
Total \$ _____
* - rentals longer than 6 hours will have a special rate.

9. The user, prior to use, **must** provide an authorized liability insurance certificate in the amount of \$2,000,000 and in the name of Wilmot United Church.

10. "The users named _____ have read, and will follow the requirements for evacuation of the church as indicated in the "Evacuation Procedures Fire Warden and Evacuation Leaders During Special Events",

Signature _____ Printed Name _____

Date: _____