

**PROPERTY USE APPLICATION
FOR THE LUTHERAN CHURCH OF THE RESURRECTION
Marietta, GA**

Date: _____

Name(s) of Individual/Organization: _____

Address: _____

Contact Person's Name: _____ Day Phone: _____

Fax: _____ Email: _____ Cell Phone: _____

Individual/Organization's Purpose: _____

Date(s) Requested: _____ Start Time: _____ End Time: _____

Frequency: ___ One Time Only ___ Weekly ___ Monthly ___ Other

Which day(s) of the week:

___ Mon ___ Tue ___ Wed ___ Thurs ___ Fri ___ Sat ___ Sun

General Information

Describe *IN DETAIL* the type of event you will be bringing to LCR, including number of participants.

Will tickets be sold or admission charged for your event?¹

Yes _____ No _____

If yes, what are the admission fess and how will the net proceeds of this event be used?

Is your group a Nonprofit 501(c)(3) organization?

Yes: _____ No: _____

Nonprofit Tax ID Number: _____

Rooms Requested:

- ___ Sanctuary
- ___ Narthex
- ___ Library
- ___ Gathering Room
- ___ Kitchen
- ___ Classroom (s)
- ___ Playground
- ___ Youth Pavilion
- ___ Robinwood
- ___ Other (_____)

Anticipated Number of Participants: _____

Will food or drink be consumed? ___ Yes ___ No

Special Needs or Requests:

Equipment Needs:

- ___ Piano
- ___ Organ
- ___ Computer and LCD Projector
- ___ Food Serving tables
- ___ Tables (# _____)
- ___ Chairs (# _____)
- ___ Other (_____)

Fees

Payment by check only (no cash) to: The Lutheran Church of the Resurrection

Facilities Usage Fee _____, per Property Usage Fee Schedule

Damage Deposit **\$100** (Refundable – separate check)

Key Deposit _____ (\$50.00 per key, Refundable – separate check)

Cleaning Fee _____ (When property use provided at no charge)

AV Assistance Fee _____

_____ Request Approved

_____ Request Denied

Signature _____ Date _____

Agreement Close-Out Notes

_____ Damage Deposit Refunded [insert to who, how much and date]

_____ Damage Deposit Retained [insert amount and reason]

_____ Key Deposit Refunded [insert to who, how much and date]

_____ Key Deposit Retained [insert amount and reason]

Signature _____ Date _____