

# Nazareth Lutheran Church – Request for CHURCH FACILITIES

Please save this form to your computer, fill it out, and email to [planningcenter@naz.org](mailto:planningcenter@naz.org) with "facility" in the subject line; or fax to 319-266-1040

DATE filling out form: _____ Organization/Event: _____ Date of Event: _____ <i>OR</i> Date of 1 <sup>st</sup> Session: _____ Date of last Session: _____	Total time needed (include set-up & clean-up) From: _____ a.m./p.m. To: _____ a.m./p.m. Events Begins: _____ a.m./p.m. Event Ends: _____ a.m./p.m. GROUP SIZE: _____
<input type="checkbox"/> One-time Use <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	

**PLEASE NOTE: ALL WEDDINGS AND/OR WEDDING RECEPTIONS WILL USE SEPARATE FORMS & WILL BE HANDLED INDEPENDENTLY.**

PLEASE CONTACT THE FOLLOWING PEOPLE FOR SCHEDULING WEDDINGS/RECEPTIONS:

Julia Voss for scheduling your wedding – [julia.voss@naz.org](mailto:julia.voss@naz.org) or Barb Burbridge for scheduling a wedding reception – [barb.burbridge@naz.org](mailto:barb.burbridge@naz.org)

This Event is (check one):     Ministry     Community     School     Personal

**THERE IS NO CHARGE FOR NAZARETH MINISTRY-RELATED EVENTS**

Are you a member of Nazareth Lutheran Church or church affiliated group?     YES     NO

Are children going to be in the building?     YES     NO – If yes, they MUST have adult supervision in a reserved room.

\*\*Please Note: Even though you have reserved a specific room, your event may be moved to another room.

**Rooms** (Please use ONLY the rooms you have reserved).

Room #	Description
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Special Set-Up Instructions: \_\_\_\_\_  
 \_\_\_\_\_

**Family Life Center (for ACTIVE NAZARETH members ONLY. Adult Member of Naz MUST be present at ALL practices)**

- Entire Gym
  - East Gym
  - West Gym
- No refunds will be issued for missed practices.**

**Nazareth Van Use (for Staff ONLY to use for Ministry-Related events)**

- Nazareth Passenger Van

(If approved, keys will be located in Inner Office with instruction form and your name on form).

**YOUR GROUP MUST BE OUT OF THE GYM OR DESIGNATED ROOM ON TIME IN ORDER TO ACCOMMODATE OTHER FUNCTIONS.**

**FEES:** (cost for facility includes set-up, tear-down, electricity, cleaning, garbage. Does not include sound/audio visual equipment)

**Family Life Center Gym**

- Sporting Events - \$25 per time block
- Events (non-sporting) - \$200

**Individual Room Usage**

- \$25 (up to 3 hours; \$15/hour thereafter)

<b>Bethel Hall</b>	<b>Fellowship Hall</b>	<b>Worship Center</b>
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- |                                |                                |                                |
|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> \$250 | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$300 |
|--------------------------------|--------------------------------|--------------------------------|

**TOTAL DUE: \$ \_\_\_\_\_**  
 (Payment must accompany contract, once approved by Nazareth).

**Coffee Shop**

\$50 (up to 3 hours; \$15/hour thereafter)

**Food Services**

- Sandwich/Chips/Dessert
  - Hot Meal
  - Cold Salads and/or Soups
- (The Food Ministry Director at Nazareth will contact you directly regarding costs/details if you are requesting food).**

- |  |  |
|--|--|
| <input type="checkbox"/> Round Tables: # _____<br><input type="checkbox"/> Long Tables: # _____<br><input type="checkbox"/> Chairs: # _____<br><input type="checkbox"/> TV/Cart <input type="checkbox"/> Projector/Cart<br><input type="checkbox"/> DVD <input type="checkbox"/> Blu Ray <input type="checkbox"/> VCR<br><input type="checkbox"/> Lighting System<br><input type="checkbox"/> Computer/Projector<br><input type="checkbox"/> Sound System<br><input type="checkbox"/> Podium | <input type="checkbox"/> Screen<br><input type="checkbox"/> Whiteboard<br><input type="checkbox"/> Video/Projector<br><input type="checkbox"/> Basketball Hoops<br><input type="checkbox"/> Music Stands: # _____<br><input type="checkbox"/> Other _____<br><br><input type="checkbox"/> AV/Technical Support - \$82.00 (subject to additional fee if 14 day advance notice is not given) |
|--|--|

**Your Contact Information: (MUST BE COMPLETED)**

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Nazareth Lutheran Church Contact Person: \_\_\_\_\_

**SIGNATURE** (Required) – Must be 21 years or older: \_\_\_\_\_