

Bailey United Methodist Church

Rental and Usage Agreement

Revised 05/2009

Facility to be used:

- Parking Lot Christian Welcome Center Classroom
 Gazebo FMC Kitchen _____
 Family Ministry Center CWC Kitchen

Reserved Date: _____ **Hours:** from _____ to _____

Deposit Amount: _____ **Rental Rate:** _____

Group/Person Making Request: _____

Address: _____

Phone: _____

I acknowledge that I have received and read Bailey United Methodist Church's Facility Use Guidelines and the Safe Sanctuary Policy. I agree to abide by all terms and conditions within the above named policies, especially when children and youth under the age of 18 are participants in the group's activities.

Signature of Property User: _____

Date: ___ / ___ / ___

Keys given: ___ / ___ / ___ **Key #:** _____

Keys returned: ___ / ___ / ___

Rental Authorized by: _____

Date: ___ / ___ / ___

Hold Harmless Agreement

The Property User shall indemnify, hold free and harmless, assume liability for, and defend the Church, its agents, servants, employees, and officers, from any and all cost expenses, including but not limited to, attorney's fees, reasonable investigative and discovery cost, court costs, and all other sums which the Church, its agents, servants, employees, and officers may pay or become obligated to pay on account of any, all and every demand for claim or assertion of liability, or claim or action thereon, arising or alleged to have arisen out of the Property User's use of real or personal property belonging to the church, and from any claims or actions by reason of any action or omission by the Church, its members, agents, servants, employees or officers.

Signature of Property User _____ **Date** _____

Printed Name of Property User _____

Signature of Church Representative _____

Date _____

<i>For Office Use Only</i>	
Deposit Received: ___/___/___	
Method of Deposit:	
<input type="checkbox"/> Cash	<input type="checkbox"/> Check Number: _____ Amount: _____
Payment Received: ___/___/___	
Method of Payment:	
<input type="checkbox"/> Cash	<input type="checkbox"/> Check Number: _____ Amount: _____
Return of Deposit Approved by: _____	Date: ___/___/___
Deposit Returned: ___/___/___	Check Number: _____ Amount: _____
<input type="checkbox"/> In Person	<input type="checkbox"/> Mail
<input type="checkbox"/> Copy given to Trustee Chair	<input type="checkbox"/> Custodian Notified (if necessary)
<input type="checkbox"/> Activity placed on calendar	