



DATE OF EVENT:

Policy for facility use on page 2

TODAY'S DATE: _____

CONTACT INFORMATION: (PLEASE PRINT CLEARLY) I have read and am familiar with the policy for facility use on page 2.

Name: _____ Email Address: _____

Organization (if applicable): _____ Cell #: _____

Street: _____ City/State/Zip: _____

Are you a member of Immanuel Bible Church? YES NO

EVENT DATE AND TIMES:

Event Date: ____/____/____ Event START Time: _____ Event END Time: _____ Total Hours: _____

SET UP: Date ____/____/____ TIME _____ • CLEAN UP: Date ____/____/____ TIME _____

EVENT DETAILS:

Request for Use of (check all that apply): Gym/Auditorium Fireside Room Education Wing (rooms _____) Pavilion*

Type of Event: Shower Banquet Open House Sporting event Party Other _____

If shower, open house, etc., for whom is the event planned? _____

Total Expected Attendance: _____ Are you charging fees for any aspect of your Event? YES NO

If Yes, please explain (including fee): _____

Please provide a summary of activities that will take place during your Event (continue on back if needed): _____

Tables and Chairs* Needed (*chairs are not available at the pavilion) # of tables: _____ # of chairs: _____

Speciality Areas (check all that you will use for your event):

- Stage
 Audio Visual System (\$50 fee)
 Kitchen (\$25 fee)

Any additional information, needs, or requests not listed? (provide on back if needed)

OFFICE USE ONLY
\$50 Deposit received on: ____/____/____
Cash / Check# _____
Deposit shredded on: ____/____/____
Rental Fee: \$ _____
AV Fee: \$ _____
Kitchen Fee: \$ _____
TOTAL \$ _____
received on: ____/____/____
Cash / Check# _____
Copy provided:
 Custodian
 Set Up
 Kitchen
 AV Tech

FACILITY POLICY

SECTION 1—REQUEST THE FACILITY

1. **Submit a completed facility request form** AND
2. **Submit refundable \$50 deposit** (check made out to Immanuel Bible Church; must be separate from fees listed in Section 2)
The check will be shredded after your event, as long as there are no damages or additional expenses incurred by the church as a result of your building usage, or if your request is denied.

SECTION 2—FINAL PAYMENT TWO WEEKS PRIOR TO EVENT if event is approved

1. **Submit final payment** of the applicable nonrefundable fees listed below (check made out to Immanuel Bible Church)
 FACILITY RENTAL FEE (\$65 for members; \$100 for nonmembers) **AUDIO/VISUAL TECH FEE*** (\$50) **KITCHEN FEE**** (\$25)

SECTION 3—FACILITY INFORMATION

CUSTODIAL SERVICES:

Custodial services will be furnished by the church. Our custodians are Jim Neumann (989.220.6908) and Michael Glupker (989.798.6621). The custodians will coordinate the set up and clean up of all areas used.

You are responsible for the following tasks:

- Communicate with the custodians all details of the proposed arrangement of the building.
- Contact the office staff **two weeks in advance** (if you do not have a key) to coordinate building entry for set-up and all deliveries to the church.
- Set up tables and chairs AND take them down and put them away after your event. Contact Michael Glupker for specific instructions.
- Removal of all materials, decorations, and items used for your event.
- A general "picking up."
- Removal of any and all kitchen and food trash to dumpster (south parking lot, west side)

*AUDIO VISUAL SERVICES:

Our Audio Visual system in the auditorium may be operated only by an IBC AV technician. **You are responsible to schedule an IBC tech ASAP for your event if you are using the auditorium AV system.** Please contact Tom Peck (989.980.9071) for the names of techs who may be available for your event. Please notify us one week prior to your event to let us know the name of the AV tech for your event.

**KITCHEN USE:

If the kitchen will be used, the responsible party **must notify** the Deaconess Chairwoman, Debby Glupker (989.777.4018). Such notification must take place no later than one month prior to the Event. The guidelines for kitchen usage will be explained to the responsible party and any caterer being used. You will be responsible for providing your own kitchen supplies (coffee, paper goods, etc.).

Time Considerations: The church must be vacated by 9:00 P.M. on Saturday or by 11:00 P.M. any other weekday night, unless prior arrangements have been approved.

No alcoholic beverages or smoking are allowed on the church properties. Rice, or other substances as such, may not be used on the church properties.

NOTICE: Absolutely no balloons are to be left in the building overnight! The movement will set off the alarm system. If you do use balloons on the day of your activity, please make sure they are removed from the building when you leave. Do not leave balloons on the ceilings!

Thank you for helping us keep our building clean and well cared for.



DATE OF WEDDING:

Policy for facility use on page 2

TODAY'S DATE: _____ I have read and am familiar with the policy for facility use on page 2.

CONTACT INFORMATION: (PLEASE PRINT CLEARLY)

Name: _____

Cell #: _____

Email Address: _____

Home Street Address: _____ City/State/Zip: _____

EVENT INFORMATION

Type of Event: Wedding only Wedding and Reception

Names of Bride and Groom: _____

Set Up / Decorating:

Rehearsal:

Wedding (& Reception if applicable)

Date: _____

Date: _____

Date: _____

Time: from _____ to _____

Time: from _____ to _____

Time: from _____ to _____

FACILITY NEEDS

Rooms/Locations (check all that apply)

Auditorium Fireside Room Classrooms (room #s _____) Pavilion*

Tables and Chairs* (*chairs are not available at the pavilion)

of tables: _____

of chairs: _____

Speciality Areas

- Stage
- Audio Visual System (\$50 fee)
- Kitchen (\$50 fee)

Any additional information, needs, or requests not listed?
(provide information on back if needed)

OFFICE USE ONLY		
\$50 Deposit received on: ____/____/____ Cash / Check# _____ Deposit shredded on: ____/____/____	Rental Fee: \$ _____ AV Fee: \$ _____ Kitchen Fee: \$ _____ TOTAL \$ _____ received on: ____/____/____ Cash / Check# _____	Copy provided: <input type="checkbox"/> Custodian <input type="checkbox"/> Set Up <input type="checkbox"/> Kitchen <input type="checkbox"/> AV Tech _____

FACILITY POLICY

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The check will be shredded after your event, as long as there are no damages or additional expenses incurred by the church as a result of your building usage, or if your request is denied. *Facility is available for wedding rental only for IBC members.*

SECTION 2—FINAL PAYMENT TWO WEEKS PRIOR TO WEDDING if event is approved

1. **Submit final payment** of the applicable nonrefundable fees listed below (check made out to Immanuel Bible Church)
 FACILITY RENTAL FEE (\$150) **AUDIO/VISUAL TECH FEE*** (\$50) **KITCHEN FEE**** (\$50)

Please note that these fees do not include an honorarium to the pastor, which is your responsibility.

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- A general "picking up."
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*AUDIO VISUAL SERVICES:

Our Audio Visual system in the auditorium may be operated only by an IBC AV technician. **You are responsible to schedule an IBC tech for the wedding ASAP.** Please contact Tom Peck (989.980.9071) for the names of techs who may be available for your event. Please notify us one week prior to your event to let us know the name of the AV tech for your event.

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