



LOVE | LIVE | SERVE

FACILITY USE REQUEST

Name of Group or Event _____

Date(s) Requested _____

DESCRIPTION OF YOUR EVENT

Estimated Attendance _____

Beginning time (including set up) _____

Ending time (including clean up) _____

AREAS REQUESTED (check all that apply)

- Main Worship Center - \$175 per hour (minimum of 2 hours)
- Family Life Conference Center (1st Floor) - \$75 per hour (minimum of 2 hours)
- Family Life Conference Center Kitchen - \$75 for the entire event
- Fellowship Hall - \$35 per hour (minimum of 2 hours)
- Fellowship Hall Kitchen - \$40 for the entire event

PRIMARY CONTACT PERSON

Name: _____ Phone: _____

Special Needs: (Setup, audio, video, lighting, etc.)

I have read the facility use policies and I agree to the stated terms, conditions and policies.

I understand that a 25% deposit is due at time of reservation and the additional balance is due one week prior to event. I hereby personally assume all risks in connection with such use, for any harm, injury, or damage that may befall me, my family, heirs, or anyone who attends our event, including all risks connected therewith, whether foreseen or unforeseen. I shall exempt and release Northcliffe Baptist Church, Inc. and its officers and agents from all liability whatsoever for personal injury, property damage, or wrongful death caused by negligence. I shall indemnify, defend, and hold harmless Northcliffe Baptist Church, Inc. from and against any claims, causes of action, damages, and expenses (including attorney's fees) of any kind and nature, whether in law or equity, including but not limited to the following: claims for personal injury (including death) and property damage, asserted against, suffered or incurred by the ministry as a result of such use of Northcliffe Baptist Church, Inc. facility. My duty to indemnify Northcliffe Baptist Church, Inc. shall survive any termination of this agreement.

I agree that all uses of the facilities of Northcliffe Baptist Church, Inc. must be in harmony with the Statement of Faith of Northcliffe Baptist Church, Inc. which I acknowledge I have received a copy of and agree to adhere to.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of Florida and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto, and the terms of this release are contractual and not a mere recital.

I further state that I have carefully read the foregoing acknowledgement and the Facility Use and Fees Policy and know the contents thereof. I sign this release as my own free act. This is a legally binding agreement that I have read and understood.

Printed Name: _____ Date: _____

Signature _____

Total Amount Due: \$ _____

-----OFFICE USE ONLY-----

Church Representative's Printed Name: _____

Signature: _____

Payment Received on: _____ Check Cash Credit