

**LIVING WATERS LUTHERAN CHURCH**

11 Old York Road - Ringoes, NJ 08551

Phone: 908-284-9455 – Email: OfficeLWLC@yahoo.com

Date: \_\_\_\_\_

**REQUEST FORM – ONE TIME USE OF CHURCH BUILDING**

Group/Individual: \_\_\_\_\_

Contact Name: \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_

Back-up Contact: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Description of Activity: \_\_\_\_\_

Area Requested:  Meeting Room  Kitchenette  Sanctuary  Narthex  Outside

Items Needed:  Tables  Chairs  Piano  Keyboard  Sound System\*\*

Date(s): \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Number of Participants: \_\_\_\_\_

**Usage Guidelines:**

- Group will provide church with Certificate of Insurance (if applicable).
- Changes made to table/chair arrangements must be returned to original set up.
- Items and areas utilized during rental must be cleaned after each use, i.e. dishes, floor.
- Smoking is prohibited in all areas of the church building. A receptacle is available outside the front entrance for cigarette butts.
- Exceptional needs (i.e. outdoor electricity, heavy items, rentals, additional parking, etc) must be approved prior to agreement.
- \$75 custodian fee
- Additional \$250 deposit\*\* if sanctuary sound system used

Both parties hereto agree to the above guidelines in good faith on: \_\_\_\_\_

Group Rep: \_\_\_\_\_ Signature: \_\_\_\_\_

Mailing address for return deposit: \_\_\_\_\_

LWLC Contact Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Donation received/waived: \_\_\_\_\_

**Mail completed form and check payable to Living Waters Lutheran Church  
11 Old York Road, Ringoes, NJ 08551**