****

**Application For Use**

Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Business or Individual Applying: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (Street and PO Box): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_

Description of Function:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Start Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Event End Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Products being sold? \_\_\_\_ Yes \_\_\_\_ No

If yes, please describe\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete and return this application along with the attached signed agreement and security deposit check or money order of $250. Please make checks payable to: Family Life Community Center. Please note that Family Life **DOES NOT** hold checks. Checks are processed upon receipt. Family Life **DOES NOT** accept payments with cash.

We recommend that you retain a photocopy of all forms for your records.

****

MC/VISA Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date \_\_\_\_\_\_\_\_\_\_\_\_\_

Name on card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check # \_\_\_\_\_\_\_\_\_\_\_\_\_ Money Order: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approval Code \_\_\_\_\_\_\_\_\_\_\_\_

**Guest Lounge**

**Rental Rates & Fees:**

$75.00 per hour *(includes powder room & private restrooms)*

**Security Deposit:** $250 *(refundable terms and conditions apply)*

**Custodian Fee:** $50 *(to set up room, an additional fee of $25 is required)*

**Guest Lounge Rental Policy:**

The following Rental Policy contains important information regarding the use of the guest lounge. It is imperative that you read and review the items listed.

1. The facility is a NO SMOKING facility. Please note: Alcoholic Beverages and controlled substances of any kind are **not** permitted on the premises. Any violation of this will result in person(s) being asked to leave the facility and premises.
2. Decorations shall be free standing. No taping, nailing, stapling or tacking of décor to walls, ceilings or fixtures. If décor is taped to windows, windows must be free of all tape and marks and cleaned at the end of usage. No glitter or party shapes permitted.
3. Any furniture moved must be returned to its original position.
4. A $250.00 security deposit is required and must be paid in full once the contract has been signed in order to secure the rental space. The security deposit will be returned within 15 business days if there are no damages. If damages are found, the security deposit shall be retained as to that portion which is necessary to repair damages. If the cost of said repairs exceed $250.00, damage charges will be invoiced by Family Life Community Center to the customer and shall be paid in full no later than one month following the date of invoice. A 1.5% monthly service charge will be assessed for non-payment following the initial 30 days. The customer shall be responsible for attorney fees and court cost required to recover payment and interest on said invoice, as well as any and all charges and fees incurred for checks that fail to be honored by their bank for any reason.
5. The customer will be charged the cost of regular rental fee for going over agreed time.
6. Rental fees must be paid in full (10) business days prior to the event.
7. Cancellations made in writing two (2) weeks prior to the requested reserved date will be fully refundable. Otherwise, those requesting the use may be responsible for payment of cost as stated on the approved application form.
8. The customer agrees to release Family Life from all liability due to loss, theft, personal injury or property damages that may occur to any person or property thereon during the period of occupancy.
9. Family Life Community Center reserves the right to cancel any scheduled use of the guest lounge if operations should require it. In such case, every reasonable effort will be made to provide the customer with adequate advance notice.
10. A Family Community Center representative will be available at the beginning of occupancy and set up time of the event and at the end of the event.
11. **For questions call or email (434) 534-6904 or community@familylifelynchburg.org**

By signing below the member agrees to adhere to the policies set by Family Life Community Center:

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

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Family Life Community Center Board of Directors Approval:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date BOD Name/ Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date BOD Name/ Signature

Revised 12/13/18 admin