



# HOLY TRINITY LUTHERAN CHURCH

4275 Lincoln Way W, Massillon, OH 44647 • 330-832-5263  
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## COMMUNITY • FACILITY USAGE FORM

Organization: \_\_\_\_\_  Non-Profit  For Profit

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code/State: \_\_\_\_\_

Website: \_\_\_\_\_ Type of Function: \_\_\_\_\_

Name of Person Booking Event: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Name of Contact (if different than above) \_\_\_\_\_ Phone: \_\_\_\_\_

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

**NOTE:** If you are a non-profit please attach proof of your status and a letter providing information about your group

Date Requested: \_\_\_\_\_ Event Start Time: \_\_\_\_\_  
 Month Day Year

**Time(s) Required (set up and clean up times must be included in the hours)**

From: \_\_\_\_\_  AM  PM To \_\_\_\_\_  AM  PM Estimated Number Attending Event \_\_\_\_\_

Is event reoccurring?

Weekly  Monthly  Yearly  Other (give details below)

Day(s) of week: please check all that apply

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

Reoccurring event details: \_\_\_\_\_

Will alcohol be served?  YES  NO

If YES to alcohol being served, you must obtain Security. We will provide you with contact information to schedule.

Will any money be exchanged?  YES  NO

If YES to money being exchanged, you must obtain a liquor permit. We will provide you information to obtain the permit.

**Furniture requirements:** (please indicate number required)

6' round tables and 8' rectangular tables seat 8 people, 3 diagrams are available for set up of the Fellowship Hall. Set up requirements **must** be turned in one week prior to the event. Tables must be covered while in use. Please do not drag tables across the floor when moving them.

Quantity	Quantity Available	Description
	25	Table Round - 6'
	22	Table Rectangle - 8'
	5	Table Rectangle - 6'
	325	Chairs

ITEM/HOURS	FACILITY or SERVICE	RENTAL FEE	NEGOTIATED FEE	TOTAL
	Deposit - Community Center - Please provide separate check	\$100.00		
	Deposit - Fellowship Hall/Pavilion - Please provide separate check	\$50.00		
	Holiday Booking Fee - see Facility Usage Guide for list	\$50.00		
	Community Center - Birthday Party (13 & younger) (4 hours)	\$60.00		
	Community Center - Birthday Party (13 & younger) additional hours	\$15.00 per hour		
	Community Center - Social Event (4 hours)	\$150.00		
	Community Center - Social Event (4 hours) > 150 Chairs	\$250.00		
	Community Center - Social Event - Additional hours	\$25.00 per hour		
	Community Center - Athletic Event (1 hour)	\$30.00		
	Community Center - Athletic Event - Additional hours	\$10.00		
	Community Center Kitchen	\$50.00		
	Fellowship Hall (1 hour)	\$40.00		
	Fellowship Hall - Additional hours	\$10.00 per hour		
	Conference Room/Rooms	\$10.00 per hour		
	Pavilion	\$30.00		
	Pavilion with Fellowship Hall Kitchen/Bathroom Use	\$10.00		
			<b>TOTAL</b>	

The organization requesting the use of the Holy Trinity Lutheran Church facilities hereby absolves the church, its pastor, council members, or members of any liability for personal injury to any individual resulting from the use of the church facilities and agrees to be responsible for any property damage that results during the use of the facilities. Please report any damages to the Building Manager promptly.

The organization using the facility is responsible for cleanup, removal of trash, decorations and all food items plus making sure the facility is returned to its prior condition. (See Facility Use Procedures)

Deposits are due with this form by separate check. Remaining fees for the Community Center are due within 30 days prior to event. All other usage fees are due within 2 weeks prior to the event.

Signature on this form accepts all fees, and Policies and Procedures in the Facility Usage Guide

\_\_\_\_\_  
Signature of Person Booking Event

\_\_\_\_\_  
Date

For Office Use Only:

Deposit Received  Usage Payment Received  Liquor License  Security

501C3 Documents  Other  \_\_\_\_\_

\_\_\_\_\_  
Approved By: (Pastor/Council President)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved By: (Building Manager)

\_\_\_\_\_  
Date

CC:

Calendar  Custodian  Maintenance  Pastor

Other: \_\_\_\_\_