



APPLICATION/AGREEMENT FOR USE OF FACILITY
Updated 3/2021

DATE: _____

APPLICANT: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____

CONTACT PERSON: _____ PHONE: _____

CONTACT EMAIL: _____

DATE OF RENTAL: _____ START TIME: _____ END TIME: _____

PURPOSE OF RENTAL: _____

APPROXIMATE NUMBER ATTENDING: _____

REQUESTED SPACE: ___ SANCTUARY ___ HALL ___ KITCHEN ___ OTHER

EQUIPMENT NEEDS: ___ PA SYSTEM ___ MICS (NOTE QUANTITY)

___ CD/DIGITAL PLAYER ___ LCD PROJECTOR ___ TV/DVD PLAYER

TERMS AND CONDITIONS

1. Center staff and/or their designee shall have full and free access to any part of the buildings and grounds at all times during such use.
2. Application for use of the facility must be made in writing to the Director. Full rental payment must be made at least one week in advance; otherwise, the date may be canceled at the sole discretion of the Center. In addition, if there is reason to believe that use may involve damage beyond that of ordinary wear and tear, the Center may require advance guarantee against loss

(deposit), or may cancel the permit at its discretion.

3. The use of the Center facilities will not be permitted, if the purpose of the organization or the event is in conflict with our philosophy of love and acceptance.
4. The use of the Center facilities shall not be granted for any purpose, which is prohibited by law.
5. The Center Director may refuse to grant permission for the use of the facilities whenever in their judgment there is good reason for refusing permission. The Director shall not be required to give a reason for such refusal.
6. Each group or organization receiving permission to use facilities must agree to abide by all rules and regulations developed by the Center.
7. No one may bring alcoholic beverages or non-prescribed controlled substances onto Center property.
8. Smoking is NOT permitted in the building.
9. All activities shall comply with all state and local fire, health, safety and police regulations.
10. Authorization for use of the Center facilities shall not be considered an endorsement of or an approval of the activity, person, group or organization or the purpose that they represent.
12. The use of flammable decorations in the Center, including cornstalks, hay, straw, or any similar material is prohibited.
13. All user organizations shall be required to provide a Certificate of Insurance in an amount of \$1,000,000 Bodily Injury and \$500,000 Property Damage prior to the start date, or the contract shall be automatically void. The Center for Spiritual Living Morristown must be added to the renter's policy as an additional insured. (Note: Private family events are exempt from this requirement.
14. All users shall be required to provide a \$250 deposit to be held by the Director until such time as the (1) date of application has passed and (2) that all property is in good condition, and that no damage and/or breakage of equipment, tables, etc. has been done by the user. If, upon review, damage has been found, then the deposit will be forfeited by the user. It is the user's responsibility to check the area prior to the use of the facility and after such use. This deposit is non-refundable in the event the organization cancels with less than one week's notice.
WAVED: YES_____ NO_____ Signed_____ Dated_____
15. All users shall be responsible for clean up after the event. This includes removal of all garbage and any decorations etc.

HOLD HARMLESS CLAUSE

The applicant assumes all risk of incident and agrees not to sue the Center for Spiritual Living Morristown for any injury to persons or property occurring during the use of the facility at 331 Mt. Kimble Avenue, Morristown, NJ and holds harmless from any and all claims brought against it by or

on behalf of any person, firm or corporation based upon any act or omission or any alleged negligence of the Center. This agreement is made in consideration of the issuance of this agreement with the applicant.

I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS:

**APPLICANT SIGNATURE
FOR CENTER USE ONLY:**

DATE

APPLICATION APPROVED: ____

APPLICATION DENIED: ____

RENTAL FEE: \$_____

EQUIPMENT FEES:

PA System: \$_____ Mics: ____ @ \$25 = \$_____ CD/digital player: \$_____

LCD Projector: \$_____ TV/DVD: \$_____

TOTAL EQUIPMENT FEES: \$_____

TOTAL AMOUNT DUE: \$_____

**SIGNATURE
REV. Dr. FRANKIE TIMMERS
CENTER DIRECTOR**

DATE

DATE DEPOSIT PAID: _____

PAYMENT METHOD: _____
Include check # if applicable

DATE FEES PAID: _____

PAYMENT METHOD: _____
Include check # if applicable

DEPOSIT REFUNDED: Y/N

DATE REFUNDED: _____

NOTES: