



HILLSIDE
COMMUNITY
CHURCH

Application Date: _____

HCC Member Non Member

Facility Request Form

Organization: _____ Type of Function: _____

Responsible Party: _____

Address: _____

E-mail: _____ Phone: _____

Desired Date: ____ / ____ / ____ Day of Week: _____ Start Time: _____ End Time: _____

If recurring - Start Date: _____ End Date: _____ *Please include time for setup, cleanup, etc.

Expected Number of attendees: _____

I have access to the building (key). I will need access to the building.

Facilities needed:

Sanctuary Kitchen Nursery ValleyView Cornerstone Youth Room

Basement Large Meeting Room Classrooms: # of rooms _____

Equipment needed:

The person/organization requesting the use of Hillside facilities hereby absolves the church, its pastors, leadership, members, or people 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 damage to the church office promptly.

The group or individual using the facility is responsible for set up, clean up, and return to normal set up of each area used. Church custodial staff may be hired if contacted in advance of the function.

Signature of Responsible Party

Date

For office use only:				
Approved by: _____		Date: _____		
CC: ____ (Custodian)	____ (Office)	____ (Tech Team)	____ (Ministry Leader)	____ (Other)
Rental Fee(s): _____	Date of Payment: _____	Received by: _____		