

MINISTRY APPLICATION AND AGREEMENT FOR USE OF FACILITIES AND EQUIPMENT

Mountain View Church of the Nazarene • 940 Israel Road SW • Tumwater WA 98501 • phone: (360)943-0795 • fax: (360)352-5819

Ministry: _____ Application Date: _____
 Contact: _____ Phone: _____ Email: _____
 Address: _____

Event: _____ **If event is a wedding, this form must be accompanied with a \$50 non-refundable deposit.**
 Start Date: _____ Finish Date: _____ (If needed weekly, check the day: Sun Mon Tue Wed Thu Fri Sat)
 (If needed monthly, indicate day: _____)
 Set-up Time: _____ Event Time: _____ Finish Time: _____
 Ministry/Staff person in charge of event: _____ Who will open/close? _____

FACILITY - check requested locations

Sanctuary *see Sound Request Form
 Sanctuary Platform (Sound Tech. Required)
 Family Center *see Sound Request Form
 Kitchen
 Playing Field
 Foyer
 Parking Lot

Nursery
 Rooms (please specify): _____
 Rooms needed for Childcare: _____
 Fellowship One check-in stations: _____ (how many?)
 Name of your ministries check-in operator: _____

Admissions/Collections/Funds solicited? Yes No Refreshments Served? Yes No
 How many participants expected? _____

Office Use Only

Nursery - Children's Ministry Approval: _____
 Family Center - Children's Ministry and AV/IT Approval: _____
 Sanctuary/Choir Room - Worship Ministry Approval: _____
 Sanctuary Platform- Worship/Tech. Approval: _____
 Audio/Visual—AV/IT Approval: _____

Requests for facility usage must be submitted to the church office at least three weeks prior to the date(s) desired (three months for weddings). Rescheduling may be necessary to resolve conflicts with church related events.

FURNITURE - check and notate quantity requested

Tables
 Round _____
 Long..... _____
 Tablecloths (church use only)
 Cloth (see additional form)..... _____
 China (church use only)..... _____

Extra garbage cans _____
 Chairs _____
 Choral Risers _____
 Grand Piano _____
 Roll away piano _____
 Other _____

Ministries are responsible for set-up and take-down of event.

AUDIO/VISUAL
 Please see Sanctuary Special Presentation Request or Sound Request for any Audio/Visual needs.

Requests are taken on a first come first serve basis. Each user assumes responsibility for damage due to unreasonable care. *Certain equipment requires an in-house trained technician. In this event, a technician will be assigned. Unless other approved arrangements have been made, equipment will be set up no earlier than two hours prior to the event, and any technicians needed will be present no earlier than one-half hour prior to the start time of the event.

06/09

HOLD HARMLESS AGREEMENT

The applicant acknowledges that Mountain View Church of the Nazarene is extending them the privilege of using its property for specifically agreed upon purposes, and recognizes that the church is not an insurer of the safety of any persons using said facility or grounds. It is agreed that this application is made subject to the general regulations for the use of church facilities. The undersigned agrees that these rules shall be strictly observed and accepts entire responsibility for the enforcement of them and agrees to protect the premises and indemnify and hold harmless the Mountain View Church of the Nazarene for any damage due to the occupancy of the building or grounds covered by this application. The applicant further agrees to protect, indemnify and hold harmless the Mountain View Church of the Nazarene and its staff and members from any claims, liabilities, damage, allegations, or rights of action directly or indirectly resulting from the use of the premises covered by this application. I recognize that the Nazarene Church beliefs are based on the Bible only, and cannot endorse other religious beliefs expressed in any afore mentioned event, and that the Nazarene Church reserves the right to preview the content of any afore mentioned event or program.

Signed

Date

CHURCH OFFICE USE ONLY CHECKLIST

- Facility user category: Member Non-Member
- Insurance Required: No Yes (*If yes, please submit copy.*)
- Staff/Personnel in charge: _____
- Church representative must be on site: No Yes _____
Name
- Someone to open/close secure _____
Name
- Date Application Received: _____
Date
- Heat needed: No Yes
- Extra Clean: _____
Date
- Billing Information
Name/Address/Phone of person to invoice: _____

Comments:

Staff notes:

Sunday Morning Sanctuary Special Presentation Request

Ministry _____

Date Submitted _____

Contact _____

Date Requested _____

Phone _____

Email _____

Submission Deadline—All presentations should be ready to run and must be submitted two (2) weeks prior to the event date. Please see Sound/Video Request Form for mic's, sound system, etc....

Type of Presentation:

Power Point

Video

Pictures

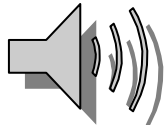
Verbal Announcement

Length of Presentation: ____ approximate minutes

Comments: _____

Approved by: AV/IT Approval _____

Pastor Review _____



Sanctuary Sound/Video Request

Ministry _____

Date Submitted _____

Contact _____

Date Requested _____

Phone _____

Email _____

Equipment Needed:

Sound System

Your Ministries Technician _____
name

Choir Mic's/Boom Mic's

Mic's ____ (how many?)

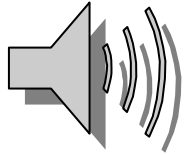
Instrument Mic's ____ (how many?)

Power Point

Your Ministries Technician _____
name

Comments:

Approved by: AV/IT Approval _____



Family Center Sound Request

Ministry _____

Date Submitted _____

Contact _____

Date Requested _____

Phone _____

Email _____

Equipment Needed:

- Family Center Sound System (CD player, DVD player, VHS player)
- Mic's ____ (how many?)

I would like to show:

- a video clip from a DVD
- a video clip from a VHS

No PowerPoint or computer generated presentation available

Approved by: **Children's Assistant Director** _____

Sound Team Leader _____