

## **Hudsonville UCC**

4950 32nd Ave

(616)669-1295

hudsonvilleucc@gmail.com

### **Recurrent Rental Fees: Non-Members**

Hudsonville UCC is pleased to be able to provide a safe, affordable facility to host your events and activities. It is expected that, as we treat our community members with dignity and respect, that our building and its facilities be treated with the same kindness. Hudsonville UCC staff will be available to help accomplish your goals, schedule your meetings and help with any questions you may have.

**Approval:** Please check with office staff using the contact info above to schedule and make sure the rooms you require are available.

<u>Fees:</u>	<u>Per Event</u>	<u>Fees:</u>	<u>Per Event</u>
<b>Gym</b>	-\$50/Hour -\$85/2hour time slot	<b>Great Hall</b>	-\$200/2hour time slot (up to 100 people) -\$300/2hour time slot (100+ people)
<b>Parlor</b>	\$40/Hour	<b>Music Room</b>	\$75/Hour
*Add cleaning services	Additional \$50	*Add personal cooking in the kitchen	\$50

Time Slots: Renter may lease a 2 hour time slot in lieu of an hourly rate. These times include time allotted for set up and clean up unless otherwise agreed upon.

Clean Up: Any decorations, food or trash brought in by the renter must also be removed by the renter. Any chairs or tables used that belong to the church must be brought back to their storage areas.

Recurrent Use: Any renter who would like to set up weekly, bi weekly, or monthly events must pay for ALL the previously scheduled and agreed upon days.

- Exceptions include cases of weather obstruction

No children (anyone under 18 years old) may rent or be alone in the building without an adult (18+) to supervise.

Payments: All payments can be made with check, Paypal, or Venmo

- Paypal:
- Venmo:
- Checks made out to "Hudsonville Congregational UCC"

\$50 deposit required for non-recurring rentals, due one week before the event.  
Deposit refunded at the end of the event if there is no damage to the church property and cleaning requirements listed above are met.

**Facilities Request for Non-Members  
Hudsonville UCC**

**Event Information:**

Date: \_\_\_\_\_ Day(s): \_\_\_\_\_

Organization/Group: \_\_\_\_\_

Contact Info: Email \_\_\_\_\_ Phone#: \_\_\_\_\_

Time of Event- Start: \_\_\_\_\_ End: \_\_\_\_\_

Set Up Time: \_\_\_\_\_ Clean Up Time: \_\_\_\_\_ Room(s) Requested: \_\_\_\_\_

Food Served? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Catered By: \_\_\_\_\_

(Must be approved by Kitchen Director)

All groups/organizations must reserve use of facilities. There is a charge for use of Hudsonville UCC facilities.

The group/organizations listed above acknowledges and agrees that it will hold harmless, indemnify and pay for the defense of Hudsonville UCC from and against all liability, claims, demands, fees, causes of action of any kind, expenses (including, but not limited to, attorney's fees of indemnity's council) that arise for Hudsonville UCC as a result of the use contracted herein. Hudsonville UCC may require a certificate of insurance in the amount of at least \$1,000,000 general liability coverage, including blanket contractual liability coverage, with Hudsonville UCC named as an additional insured.

All groups/organizations shall be responsible for all damage to or loss of property, including that belonging to Hudsonville UCC staff and ministry organizations during the time they use the facility.

Hudsonville UCC is NOT responsible for any lost, stolen or damaged items. Hudsonville UCC reserves the right to deny rental or use of its facilities to any group.

**The group/organization listed above will be asked to sign this statement acknowledging their willingness and understanding of the compliance with HUCC Safe Church policy, which are available for review in the Kitchen or Office.**

I, representing the group/organization listed above, agree to the terms listed above and agree to pay the fees shown in the General Facility Use Policies.

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

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

*(Please sign and return with deposit within 15 days for confirmation)*

Facility Rental Invoice

Room Requested \_\_\_\_\_ Fee: \_\_\_\_\_

Room Requested \_\_\_\_\_ Fee: \_\_\_\_\_

Room Requested \_\_\_\_\_ Fee: \_\_\_\_\_

Total Due: \_\_\_\_\_ Date Due: \_\_\_\_\_

**Office Use Only**

Date Form Received: \_\_\_\_\_ Date Paid: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Request Approved By: \_\_\_\_\_ Initial: \_\_\_\_\_

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