**MT. TABOR FIRST BAPTIST CHURCH**

**4909 St. Johns Avenue - Palatka, FL 32177**

**REQUEST FOR USE OF SANCTUARY**

**WEDDING**

Today's Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Facility requested by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wedding of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(Please list groom and bride’s full name)*

**Date(s) requested**: ***Rehearsal Date***: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Wedding Date***: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Rehearsal Start Time:** \_\_\_\_\_\_\_\_ A.M. P.M. End Time: \_\_\_\_\_\_\_\_\_ A.M. P.M. *(Approx. 2 hours)*

**Facility Opening Time: \_\_\_\_\_\_** A.M./P.M. **Wedding Start Time:** \_\_\_\_\_\_\_A.M./P.M. **End Time:** \_\_\_\_\_\_\_\_\_A.M./P.M.

*(Opening time thru end time should not exceed 4 hours)*

**Wedding Coordinator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wedding Coordinator Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Wedding Officiator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wedding Officiator Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I understand and agree that I am fully responsible for this facility during this activity and hereby assume all liability and responsibility for any and/or all damage incurred. I will make no alterations to any part of the facility. I acknowledge that I have received a copy of the wedding guidelines of Mt. Tabor First Baptist Church. The Chairman of the Trustees or other Authorized Church Official will approve use of facility in accordance with the rules and regulations of the Mt. Tabor First Baptist Church, Inc. The Trustee Chairman and the Pastor shall exercise final authority on any agreement for use of facilities subject to the procedures of the Board of Trustees of Mt. Tabor First Baptist Church. I also understand that there are extra charges for any additional use of facilities beyond the time specified.

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

 Signature of Responsible Individual

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Authorized Church Official

Authorized: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Pastor/Trustee Chairman

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*Use of Facilities (Sanctuary)\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**\*\*CHARGES\*\***

**An initial deposit of ($250.00) is payable upon approval. The balance of ($250.00) must be paid two weeks prior to the scheduled event.**

**Type #1:** The sanctuary is provided complimentary however a donation of $150 is required to offset janitorial and audio-technician services.

**Type #2, Type #3 and Type#4:**

*Sanctuary (Includes the opening and closing of sanctuary by the audio technician for a definite time period of up to 2 hours for the rehearsal and decorating, and up to 4 hours for the wedding). If rehearsal, decorating of facility, or wedding exceeds allotted time a fee of $25/per half hour will be assessed to total charge.*

***Total Cost***……………………………………………………………………………………………………………………….$**500.00**

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Other purposes or areas: Amount determined on individual basis. Insurance may be required in some cases.

For office only: Fee applicable? Yes or No: If yes: Amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type #1 Requestor: Active Tithing Member

Type # 2 Requestor: Non-tithing Member/Inactive Member

Type # 3 Requestor: Non-Member

Type #4 Requestor: Other Church/Non-profit Organization

Revised (10/09)