

Policy and Procedures For Occasional Private Use of Mount Hope Lutheran Church Facilities

Purpose

The purpose of this policy is to clearly define situations that can be approved for Mount Hope member's to use the church facilities for non-church program events. The intent is to offer a venue that is consistent with a Christ centered celebration.

Definitions

Private: This means for your invited guest list.

Non Church Calendar Event: This means the event is not published as a congregational event even if the congregation is invited to attend.

Mount Hope Members: This means a person who is a committed, communing member of Mount Hope Lutheran Church.

Definitions of Spaces, Included Equipment, Restrooms and Entrances

Suggested donation fees are payable 10 days prior to your event. The \$100 refundable security deposit is due with your application. This security deposit is in addition to usage fee listed below.

Fellowship Hall: The lower level of the church building includes the handicapped accessible restrooms on the lower level, west end.
Use of the parking lot, center entrance is required.
An audio system is included. Microphones are available.
Person Capacity is 160 seated at banquet tables and 225 seated in rowed chairs.
Suggestion donation: \$250 minimum for 4 hours use plus \$50 per prescheduled hour after four hours.

Fireside Room: This Fireside Room is on the upper level near the center parking lot entrance. It has a gas-fueled fireplace. Restrooms are on the upper level of the Education Building.
Use of the parking lot center entrance and/or the Fireside entrance is required.
Suggested donation: \$150 minimum for 4 hours use plus \$25 per prescheduled hour after four hours.

Assembly Rm.: The Assembly Room is on the upper level of the Education Building. It has a tiered seating area and will seat 40 people at banquet tables and 90 in rowed chairs.
Restrooms are on the same level, across the hall.
Suggested donation: \$150 minimum for 4 hours use plus \$25 per prescheduled hour after four hours.

Youth Room: The Youth Room is on the lower level of the Education Building. It will seat 80 people at banquet tables and 120 in rowed chairs.
Restrooms are on the same level, across the hall.
Suggested donation: \$150 minimum for 4 hours use plus \$25 per prescheduled hour after four hours.

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Main Kitchen: The use of the kitchen may be requested for either food preparation and/or serving or for use by a catering service for serving only. Specific kitchen equipment must be itemized in the agreement. Cost of rental is included with fee.

Classrooms: Certain classrooms can be available to augment the main gathering space. These may be used to accommodate breakout sessions and small groups.

Excluded Spaces:

Worship Nave, Choir Loft, Chancel and the Chapel. If the Fireside Room is used, the doors to the Nave must remain closed and no one may cut through the Nave (church) to other parts of the building. Please respect other scheduled activities by staying in your assigned space. Children may not be allowed to “run and chase” in the worship spaces or in the corridors.

Allowed Uses:

A reception may be held for Weddings, Baptisms, Anniversaries, Birthdays and/or Renewal of Vows. Upon written request to the church office, the Facilities Management Committee may approve other uses.

Restrictions on Allowed Uses:

Music must be consistent with Christian values. The sound systems are not designed for nor are they capable of loud music venues. Crowd noises will be limited to cheerful, joyous Christian conversational voices with occasional cheers and applause. Loud, boisterous conduct is not allowed. No foul language will be tolerated. Decorations must not be taped, stuck or tacked to any surface. The entire facility is a *Smoke Free* environment. Smoking will only be allowed outside of the parking lot entrance doors and no closer than 10 feet from the doors. Wine, beer and hard liquor strictly forbidden. No “spiked” punch or “set-ups” allowed. This limitation may seem unduly restrictive, but the Congregation must never be exposed to consequences of irresponsible alcohol consumption on the premises. Event, including cleanup, must be complete before 10:00 p.m.

Prohibited Uses:

Youth parties without the direct supervision of chaperoning adults.
Any use that could be construed to be in competition with commercially available space.
Gambling.

Application Lead Time:

Application must be made 90 days in advance of the event.

Custodial Remuneration:

Custodial: \$15.00 per hour for scheduled hours plus 1-hour setup and 1 hour teardown.
Additional remuneration when holiday.

APPLICATION FOR PRIVATE USE OF MOUNT HOPE LUTHERAN CHURCH FACILITIES

(Complete and return to the church office)

Application Date: ____/____/____ Applicants Name _____
(Mount Hope Membership Required)

Address: _____
(apt.) (city) (state) (zip)

Phone # _____ Cell Phone # _____ e-mail _____

Event to be celebrated – full description of the event: _____

Number of Guests expected: _____ Room requested: _____

Date: _____ Start Time: _____ End Time: _____

Kitchen Use: ____ Yes ____ No Is this a catered event? ____ Yes ____ No

Name of caterer _____ Phone # _____

If non-catered, how do you expect to use the kitchen? _____

It is understood that after using the kitchen, users will do the following:

- The room will be left as found.
- Dishtowels will be hung to dry.
- Verify stove/oven is turned off.
- No leftovers left in refrigerator, freezer or on counters.
- Spills cleaned up from stove, microwave, walls, counters and floors.
- Bring in all food and paper products.
- All damage/breakage will be reported to the church office on the next business day.

In signing this application, I agree to abide by the terms in this application and the terms in the Policies and Procedures For Occasional Private Use of Mt. Hope Lutheran Church Facilities. I hereby absolve and hold harmless Mt. Hope Lutheran Church and its employees from any liability for injuries and damages sustained at Mt. Hope. I further provide that this consent and waiver applies to my heirs, executors or assignees.

Signature: _____ Date: _____

(OFFICE USE ONLY)

Approved on: _____

Deposit Received: _____

Suggested Fee Received: _____