



First United Methodist Church
 2710 14th Street
 Columbus, NE 68601

FACILITY RESERVATION FORM

Event/Organization _____ Date _____

Church Member _____ Yes _____ No _____ Non Profit _____ Yes _____ No _____

Contact Name _____

Contact Email _____

Contact Phone _____

Purpose for Use _____ # of Attendees _____

Start Day and Date: _____ Event Time: _____ Unlock Time: _____

End Day and Date: _____ Event Time: _____ Lock Time: _____

Recurring: _____ Yes _____ No _____ Weekly _____ Monthly _____ Bi-Weekly _____

Downtown Church

Chapel Parlor _____ Library _____ Gathering Area _____ Sanctuary _____

Fellowship Hall & Kitchen _____ Classroom (Room #) _____ Other _____

Outreach Center

Community Room w/Kitchen _____ Wesley Room _____ Meditation Room _____

Youth Underground _____ *(Must be approved through Christian Ed & Youth Director.)*

TV/DVD/Sound yes _____ no _____

Suggested Donations (see back) Deposit \$ _____

Donation \$ _____

We agree to the policies and procedures of First United Methodist Church & Outreach Center, including but not limited to suggested donations, set-up and clean-up. **Only spaces reserved and requested may be utilized.**

Signature

First UMC Staff Member

Columbus First United Methodist Church (First UMC) and Outreach Center (OC)

Facility Reservation Form

HOLD HARMLESS AGREEMENT

The applicant and the individual executing this application hereby waive any and all claims, demands, and causes of action that they may have against First UMC as a result of the use of church facilities pursuant to this application. The applicant and the individuals executing this application shall indemnify and hold harmless Columbus First UMC and Outreach Center, its officers, agents, and employees from and against any and all costs of litigation arising out of or associated with the use of church property by the applicant group and its members, guests, employees and agents pursuant to this application.

Columbus First UMC and Outreach Center reserves the right to require any user group to provide a certificate of liability insurance (COL) in the amount of at least \$500,000, naming Columbus First UMC as an additional insured.

I / We have read and agree to comply with the Columbus First United Methodist Church and Outreach Center Facilities and Equipment Usage Policy.

Applicant's Printed Name: _____

Applicant's Signature: _____

Address: _____

Phone Number: _____

Email: _____

Donation and/or Deposit Amount _____ Submitted on _____
(Date)

Suggested Donation / Damage Deposit Amounts

Downtown Church

Fellowship Hall w/ Kitchen (Capacity 180) \$250 deposit (refundable) \$100 Member / \$250 Non-member

**Library, Chapel Parlor w/kitchenette or
Gathering Area w/ coffee area** (Capacity 15-20) \$50 deposit (refundable) FREE members / \$25 Non-member

Outreach Center

Community Room w/ Kitchen (Capacity 232) \$250 deposit (refundable) \$100 Member / \$250 Non-member

Wesley Room (Capacity 150) \$250 deposit (refundable) \$100 Member / \$250 Non-member

Youth Underground \$250 deposit (refundable) \$100 Member / \$200 Non-member