

Facility Rental Request Form

Organization/Group Name: _____

Primary Contact Person: _____

Phone: _____ Email: _____

Purpose of Event: _____

Requested Date(s): _____

Event Start Time: _____ Event End Time: _____

(Time must include setup and cleanup.)

Estimated Number of Attendees: _____

SELECT RENTAL TIER (Check One)

Tier 1 - Community & Small Meetings

(1-25 people | minimal setup | low impact)

Tier 2 - Programs & Mid-Size Events

(26-100 people | moderate setup | AV or food possible)

Tier 3 - Large Events & Special Occasions

(100+ people | extensive setup | staffing/security required)

Final tier assignment subject to facility approval.

SELECT SPACE(S) & HOURLY RATES

Assembly Hall 1 - Main Sanctuary (Capacity 600)

Tier 1 - \$150/hr

Tier 2 - \$175/hr

Tier 3 - \$200/hr

Hours Needed: _____ **Estimated Cost:** \$ _____

Assembly Hall 2 - Fellowship Hall (Capacity 150)

Tier 1 - \$100/hr

Tier 2 - \$125/hr

Tier 3 - \$150/hr

Hours Needed: _____ **Estimated Cost:** \$ _____

Gymnasium (Capacity 250)

- Tier 1 – \$100/hr
- Tier 2 – \$125/hr
- Tier 3 – \$150/hr

Hours Needed: _____ **Estimated Cost:** \$ _____

Courtyard (Capacity 150)

- Tier 1 – \$75/hr
- Tier 2 – \$100/hr
- Tier 3 – \$125/hr

Hours Needed: _____ **Estimated Cost:** \$ _____

Corner Café Seating Area (Capacity 35)

- Tier 1 – \$50/hr
- Tier 2 – \$65/hr
- Tier 3 – \$75/hr

Hours Needed: _____ **Estimated Cost:** \$ _____

Conference Room (Capacity 20)

- Tier 1 – \$40/hr
- Tier 2 – \$50/hr
- Tier 3 – \$60/hr

Hours Needed: _____ **Estimated Cost:** \$ _____

ADDITIONAL NEEDS (Check All That Apply)

- Audio/Visual Equipment
- Microphones
- Tables & Chairs Setup
- Food Service / Catering
- Extended Setup Time
- Security Required
- Cleaning Services

IMPORTANT ACKNOWLEDGMENTS

- I understand rental time includes setup and breakdown
- I understand overtime is billed at \$100 per hour
- I understand final approval is required

Estimated Total Rental Cost: \$ _____

Signature: _____ **Date:** _____

ADDITIONAL REQUESTS / ADD-ONS

- Sound/AV Technician (\$75-\$100)
 - Microphones / Speakers / Projector (Fee to be discussed and agreed upon)
 - Security (\$25-\$35/hour)
 - Kitchen Access (\$50-\$100)
 - Tables & Chairs Setup/Breakdown Assistance (Fee to be discussed and agreed upon)
 - Other Needs: _____
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SPECIAL NOTES / SETUP NEEDS

SIGNATURES

Applicant Signature: _____ Date: _____

Approved By (Facility Representative): _____

FACILITY RULES & CONDUCT AGREEMENT

By submitting this request, the applicant agrees to the following:

- No alcohol is permitted on the premises.
- This is a smoke-free and vape-free campus (inside and outside).
- No illegal drugs or substances are allowed at any time.
- All activities must maintain a respectful, family-friendly environment. Failure to follow these guidelines may result in immediate termination of the event and loss of all fees paid. Applicant Initials: _____

Insurance Requirement

Does your event involve **any** of the following?

Yes No

- More than 25 attendees
- Open to the public
- Food service or catering
- Amplified sound or production equipment
- Physical activity (sports, dance, fitness)
- Wedding, reception, concert, or conference

If YES is checked:

Proof of **\$1,000,000 General Liability Insurance** is required before final approval.

If NO is checked:

Insurance is **not required**, subject to administrative approval.

Acknowledgment

I understand that insurance may be required based on the nature of my event and must be submitted before approval if applicable.

DEPOSIT POLICY:

- A **\$100 non-refundable deposit** is required to reserve any facility space once your date is approved.
- Your date is **not secured** until the deposit is received.
- The remaining balance is due **no later than 7 days before the event**.
- Events booked within 7 days require **full payment at the time of approval**.

Email completed form to: info@wpfcinc.org

Phone: (386) 257-2559 or (386) 259-2655

Word & Praise Family Church, Inc.