105 West McClanahan Street Post Office Box 757 Oxford, NC 27565

Application for Facility Use

Area of Building Requested: (Refe	Sanctuary er to rate schedule for costs a		ship Hall/Kitchen area.)	
Person requesting use:		Organization:		
Address:		Phone:		
City/State	Zip: Email:			
Phone: Daytime	Evening			
Date(s) OUMC space is needed:		Time:		
 I/we certify that the use of the buildi I/we certify that our organization is a I/we agree to hold harmless Oxford the church arising out of any incident conjunction with usage. Additionally, I and will pay all costs for such damage I/we agree to observe all policies and Administrator, Pastor, Wedding Coordi 	a non-profit or service oriented United Methodist Church and in resulting in any loss or damage Jwe will be responsible for any ss. d guidelines contained in Build	I organization. Indemnify the church are to persons or proper and all damages to the chiral of the	and defend any claim or action against rty occurring on church premises in the building, grounds, or equipment	
Signature:	Date	e:		
Church Office Only - Do Not W				
APPROVALS: Office Administrator Pastor Approval (if applicable) Minister of Music (if applicable)		_ Date: _ Date:		
DATES FEES RECEIVED: Reservation/Security Fee				
Janitorial Services Fee Facility Use Fees Sound/Lighting Tech Fee Organist/Pianist Services Fee	!! !! !!	_ _ _ _		
Kev Picked Up / /		Kev Returned	1 1	

In order to reserve a room for your group or activity, we must have an Application for Facility Use on file which includes every date your organization will be using our building. Thank you for your help in scheduling. This Application for Facility Use must be updated annually.