

First Unitarian Universalist Society of Albany

405 Washington Avenue
Albany, NY 12206
518-463-7135

Facilities Rental Application

RENTAL REQUEST Day and Date of requested rental _____

Time (use a.m./p.m.): Set Up _____ **Event Start** _____ **Event End** _____ Finish Clean Up _____

_____ One time use _____ Ongoing rental: (describe, e.g. first Monday/month) _____

Room(s) requested (circle): ...Sanctuary...Channing Hall...Emerson Community Hall...Lobby...Kitchen...Stott Lounge

Or Classroom number(s): _____

Name of Event: _____ # people attending _____

Description of activity (if needed): _____

Circle below as needed:
 General type of set up: ...Lecture style (chairs)...Workshop or meal (tables and chairs)...Other: _____

Will you be serving: ...Food ...Alcohol?

Will you need sound system or other AV equipment?

Will you need a key to gain access during a time when the church office is closed?

Will you need a Building Steward (to unlock doors and staff the lobby) or will your guests ring doorbell for entry?

APPLICANT

_____ Contact Person _____ phone number _____

_____ Organization _____ email address _____

_____ Street _____

_____ City, state, zip _____

RENTAL AGREEMENT

I have read and agree to the conditions of use as listed in the "Building Use Policy" and recognize that failure to adhere to said conditions shall be cause for termination of arrangements for use.

_____ Applicant Signature _____

_____ Date _____

This rental agreement is not final until written approval is received.

_____ Approved by _____

_____ Date _____

FOR OFFICE USE ONLY

FEES

Room(s) _____

Equipment _____

Building Steward _____

TOTAL _____

Deposit received _____

Balance due before event _____

Balance of rent and the two deposits below are due by _____

SECURITY DEPOSIT _____
(Separate check)

KEY FOB DEPOSIT \$10 each
(Cash or separate check)

Ongoing rental payment plan: