Parishioner since \_\_\_\_\_\_\_\_\_\_ Non-Parishioner

**CONTACT:**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Please Print)

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (W) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please check preferred contact number)

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Event Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Event Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Setup Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FACILITIES REQUESTED:**

 Church Cenacle Room (seats 30)

 Full Hall (seats 300) 2/3 Hall (seats 175; windows) 1/3 Hall (seats 125)

Number Attending: \_\_\_\_\_\_\_\_\_\_

Will you be serving: Food (Please see list of approved caterers)

 Name of Caterer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Arrival time of Caterer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Beverages

 Alcohol (Please complete Diocesan forms)

**RENTAL FEES:**

**Parishioner (minimum 1 year from date of this agreement)**

Church ($350) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parish Hall Damage/Policy Deposit ($100) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parish Hall ($50/hour, min. 2 hrs.; maximum $250)\* $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Non-Parishioner**

Church ($800)

 $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\***Includes time for set-up and teardown**.**

**Other Charges**

Clean-up Service Fee ($150.00) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Any additional cleaning hours required may be deducted from the damage deposit.

**The Facility is not reserved until deposits are paid**. All other fees must be paid upon execution of the agreement, **no later than 30 days prior to the event**. A cancellation fee, not to exceed $100 as described in the Agreement Form, will be incurred if the event is cancelled less than 30 days before the event.

**Deposits Received: Date: \_\_\_\_\_\_\_\_\_\_Amount:\_\_\_\_\_\_\_\_\_\_\_ \_\_ Cash \_\_Check #\_\_\_\_\_\_\_\_\_\_**

**Fee Received: Date: \_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_ \_\_Cash \_\_Check #\_\_\_\_\_\_\_\_\_\_\_**

**Deposit Returned: Date: \_\_\_\_\_\_\_\_\_\_ Amount: \_\_\_\_\_\_\_\_\_\_ \_\_ Cash \_\_Check #\_\_\_\_\_\_\_\_\_\_**

Reason for non-return of deposit:

**Diocesan Insurance Fee (mandatory for all rentals)**

Diocesan Liability Insurance Policy: The Diocese of Peoria requires liability insurance coverage regardless of the number of people in attendance and whether or not alcohol is being served. An application along with a non-refundable cost of **$100.00** must be mailed to the Diocese no later than **15 days** in advance of the event.

 Checks should be made to ***Dunne Property, N.F.P.***. Check #\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_

Insurance Certificate Applied for: Date Applied:\_\_\_\_\_\_\_\_\_\_\_\_ Date Received\_\_\_\_\_\_\_\_\_\_\_\_

Renters may obtain personal insurance by providing Epiphany with a “certificate of insurance” naming Epiphany Roman Catholic Church and the Diocese of Peoria, Illinois as additional insured’s for $1 million dollars. Certificate of Insurance must be received by \_\_\_\_\_\_\_\_\_\_\_\_(date).

I have read and understand the Epiphany Parish Rental Agreement Form and Epiphany Parish Hall Usage Guidelines.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_