



We're All About Jesus!

APPLICATION FOR USE OF FACILITIES

Applicants Name _____ **Title** _____

Organization _____

Address _____

City _____ **State** _____ **Zip** _____

Phone Where You Can Reached _____ **Alternative** _____

V.C.C. Member Sponsoring Event: _____

V.C.C. Member Signature _____ **Date** _____

Facilities You Are Requesting **Sanctuary** **1st Classroom** **2nd Classroom**
 Office **Kitchen** **Nursery**

Date Needed _____

Equipment Needed _____

Upon approval of this application, I agree to be held liable for any damages or theft to the building or equipment while in my care. I have read and understand the facility usage policy regarding my responsibilities and agree to abide by its regulations. If requested to do so, I will provide a Certificate of Insurance with Valley Community Church as the additional insured.

Outside Group Representative _____

Representative Signature _____ **Date** _____

*******FOR OFFICE USE ONLY*******

Accepted **Denied**

Authorized Signature _____ **Date** _____

Certificate of Insurance Obtained **Deposit Paid If Applicable**