



Holy Trinity Catholic Church and School

Facility Reservation and Use Form



Please complete the following information:

1. Sponsor Name: _____
2. Address: _____
3. Daytime Phone: _____
4. Evening Phone: _____
5. Please select the facilities you are requesting from the list below:

Church Parish/Community Center Cafeteria Kitchen
 Gymnasium Soccer Fields Softball Diamonds

6. Please list the date(s) and time(s) of the facility you wish to use and describe the type of activity.

Date(s) and Time(s) Requested:	Type of Activity and Special Requests:
_____	_____
_____	_____
_____	_____

7. Is your request related to a Holy Trinity Organization or Event? Yes or No (circle one)
 - If yes, what Church or School Organization do you represent? _____
8. How many people do you expect to attend? _____
9. Is this a one-time or regularly scheduled meeting/event? (circle one) One-time / Regular
10. If this is a regularly scheduled meeting/event, what is the schedule? _____
11. Will food and/or drinks be served? (circle one) Yes or No
 - What is the name of the food preparer or caterer? _____
12. Did you read and understand the Facility Use Policy and fee schedule? (circle one) Yes or No
13. Do you have any special requests (i.e. audio/video needs, room set-up, etc.) (circle one) Yes or No
 - If yes, what is the special request? _____

14. **Damages:** The group, individual, or organization using Holy Trinity Catholic Church and School facilities agree to compensate Holy Trinity Catholic Church and School for all damages to facilities, equipment, or other property owned by Holy Trinity Catholic Church and School. **The person completing this form will be responsible for reimbursement of damages.**
15. Insurance Requirements: Sponsor must provide evidence of liability insurance. If sponsor is an organization, a Certificate of Insurance must be provided. If sponsor is a person, a copy of Homeowner's or Personal Liability Insurance Policy must be provided.
16. Damage/Cleanup Deposit (if applicable): \$_____
17. As sponsor of an event or activity at the facilities of **Holy Trinity Catholic Church and School**, the undersigned agrees to protect, indemnify and hold harmless **Holy Trinity Catholic Church and School and the Catholic Diocese of Belleville** from any and all loss, cost, damage or expense arising out of or from any accident or other occurrence on or about the premises, causing injury to any person or property; the undersigned further agrees to protect, indemnify and hold harmless **Holy Trinity Catholic Church and School and the Catholic Diocese of Belleville** from any and all claims, cost or expenses arising from any failure of the sponsor in any respect to comply with or perform all requirements or provisions of this agreement, or of any applicable law or ordinance, during the period of use.
18. This application will be reviewed by the Facility Use Committee before any date may be reserved.

Signed: _____ Date: _____

Office Use Only:

Facility Use Fee _____	Damage / Clean-up Deposit Required _____
Cash _____ Receipt No. _____	Cash _____ Receipt No. _____
Check _____ Check No. _____	Check _____ Check No. _____

Received by: _____

Approved / Disapproved (Circle One) by: _____