



The Unitarian Universalist Church of Greater Lynn
101 Forest Avenue, Swampscott, MA 01907
Phone: 781-599-8836 www.uucgl.org

ROOM-USE AGREEMENT

EVENT INFORMATION

Type (Name) of Event \_\_\_\_\_

Number of people expected \_\_\_\_\_

Date(s) \_\_\_\_\_ Beginning time \_\_\_\_\_ Ending time \_\_\_\_\_

Rehearsal Date(s) and Times \_\_\_\_\_

Check if you need to use: Sound System [ ] Microphone [ ] Other A/V [ ] Piano [ ] Organ [ ]

Check if you need the sexton to set up and remove chairs and tables [ ] If so, how many chairs \_\_\_\_\_ and/or tables \_\_\_\_\_
(Please arrange/draw layout with Administrator before signing this Agreement)

Name of any clergy persons you will be using? \_\_\_\_\_ Tel. # \_\_\_\_\_
(UUCGL Minister must approve)

APPLICANT

Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Address: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

CONTACT PERSON

Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

TERMS and CONDITIONS

- 1. Applicant agrees that he or she has been provided with a copy of the Policies and Procedures for Room Use, included by reference as a part of this Room-Use Agreement. Applicant further agrees that he or she has read and will abide by said policies and procedures.
2. See Fee Schedule for the schedule of costs.
3. Exceptions and waiver of fees must be requested through Administrator.
4. Church membership carries the privilege of reduced fees for use. However, members must pay sexton costs or take responsibility for security of the church and cleanup. Members may not sponsor non-church groups to attain free use.
5. Do not use the organ or piano(s) unless your group has specifically arranged for such use in advance and discussed fees.
6. An adult must be assigned to supervise children at all times on the premises and adhere to UUCGL Safe Congregation policies.
7. The Unitarian Universalist Church of Greater Lynn and its employees and officers shall not be responsible or liable for loss or damages by reason of fire, theft, or other cause.
8. Cancellation Cost: The full fee will be returned if cancellation occurs more than 30 days prior to event.

I AGREE to the above Terms and Conditions: \_\_\_\_\_ Applicant \_\_\_\_\_ Date \_\_\_\_\_