

FACILITY USE APPLICATION

Holy Innocents' Episcopal Church is blessed that you have chosen us to host your event.

IMPORTANT: Please note that we cannot take your room request into consideration until this application has been completed <u>and</u> approved by the Events Coordinator or Rector. Please complete the below application and return it to:

Events Coordinator: Kia Harper Holy Innocents Episcopal Church 805 Mt. Vernon Hwy NW Atlanta, GA 30327

Phone: 404-751-2911

kharper@holyinnocents.org

NOTE: If your group/event is approved, we will require the following documents in order to continue with the process of coordinating your event at Holy Innocents' Episcopal Church:

- Signed Facilities Use Agreement
- Signed General Release and Indemnity Agreement
- Where practicable, Certificate of Liability Insurance in the amount of \$1,000,000.00 (minimum), naming Holy Innocents' Episcopal Church as an ADDITIONAL INSURED

Organization / Group Name:	Application Completion Date :
Organization Information:	Organization Contact Person:
Address: State: Zip:	Name:
Phone:	Address:
Fax:	City: State: Zip:
Email:	Phone:

Approved at vestry Meeting 10/16/12	
Website:	Fax:
	Email:
How did you learn about Holy Innocents' Episcopal Church?	What is the primary mission of your organization?
Is your group/organization non-profit?	
Yes No	
How long has your group/organization been in existence?	How often do you anticipate using our facilities? Once Monthly Weekly
	Other (please explain)
	What is the requested date and time for your event?
	What length of time is your anticipated event?
	hours
What type of space/support do you need? (a conference room, large meeting space, etc.)	Do you need AV/media set up?
	Yes No
	Do you need food preparation and/or catering service?
	Yes No

Application submitted by:		Signature:
,	(Print Full Name)	<u></u>

Approved at Vestry Meeting 10/16/12

*VESTRY APPROVED ______, 2012