

ALPHARETTA PRESBYTERIAN CHURCH PROPERTY USAGE REQUEST

| Organization's Name | | |
|--|--|--------------------|
| Mailing Address | | |
| Insurance Certificate Attached Yes No (for non-APC groups and organizations) | | |
| Is this group sponsored by Alpharetta Presbyterian Church? Yes No | | |
| Number of people involved | Room requested | |
| Brief description of activity planned | | |
| Childcare Needed? Yes No | Children or Youth participating in event? Yes No | |
| Equipment required (i.e. tables, chairs, A/V, etc.) Yes No | | |
| Usage: One time Date | | Time |
| Continuous Start Date | | End Date |
| Weekly: Day(s) | | Time |
| Monthly: Day(s) | | Time |
| Responsible Officer or Leader (name, telephone number and email) | | |
| 1.) | 2.) | |
| Phone | Phone | |
| Email | Email | |
| have read and approve of the facility use policy. | | |
| | Signature of Respo | nsible Person DATE |
| f youth and children are participating in the group and their parents are not present, all adults working with children must consent o APC conducting a state and national background check. The APC office will contact you for a list of adults with their name and mail address. They will receive an email with instructions on how to complete the background check. The background check equires a fee of \$21 per person. | | |
| APPROVED BY | DATE | ROOM ASSIGNED |

Alpharetta Presbyterian Church reserves the right to relocate or reschedule this activity should a church activity, deemed urgent by the Session or Property Trustees, take precedence over this activity. Should this occur, every effort will be made to accommodate your activity in another part of the building on the same date and without disruption to the above group activity. The groups using the building assume total responsibility for any claims, property damage, or personal injury resulting from the use of the building and agree to indemnify and hold APC harmless from any such claims.

Fax to (770) 751-0873 or email office@alpharettapres.com