

GOODRICH UNITED METHODIST CHURCH
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Regular Events/Meetings Contract

Today's Date _____

Group/Organization: _____

Contact Person: _____ Phone: _____

Address: _____
Street City Zip

Meeting/Event: _____

Dates Requested: _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____ / _____

Set Up Time: ____:____ am/pm Date/Day _____

Event is scheduled from ____:____ until ____:____

Departure Time ____:____ am/pm

Room(s) Needed:

- Dining Room Gymnasium Kitchen
 Lg. Meeting Room Sm. Meeting Rm.
 (other) _____

Set Up Requested

Tables # _____ Chairs # _____

Sports equipment: _____

Audio/Visual: _____

Refreshments will be served: Yes No

Signed: _____ Date _____

Contract Approval

Approved by: _____ Date: _____

Rental Costs: N/A (# of hrs. X fee) _____

* A \$25.00 custodial fee is required when an event lasts more than 3 hours. Other

Costs: _____ Total Cost: _____

Deposit: _____

Calendar

Payment Date: _____ Rec'd by _____

NOTES: _____

