



**THE CONGREGATIONAL CHURCH
UNITED CHURCH OF CHRIST
30 N. CLINTON STREET
IOWA CITY, IOWA 52245
(319) 337-4301**

APPLICATION FOR BUILDING USE

Name (Individual/Organization/Entity): _____

Address: _____

Email Address: _____ Phone Number: _____

Member of Congregational UCC? Yes No

Contact Person(s): _____ Mobile Phone # _____

Designated Supervising Adult(s) _____ Mobile Phone # _____

Area(s) Requested: Sanctuary Chapel Kitchen Classroom(s) Rockwood Hall

Event Date(s): _____ Event Time(s): _____

Rehearsal Date(s): _____ Rehearsal Time(s) _____

Type of event: Charitable Religious Community Service University Related
 Other: (Please specify) _____

Is this a ticketed event? Yes No If yes, cost of tickets: \$ _____

Briefly describe event and room set up needs: _____

- | | |
|---|--|
| <ul style="list-style-type: none"> • Security Deposit \$100.00 (refundable) • Key Deposit \$ 75.00 (refundable) • Sanctuary Use \$100.00 per day • Kitchen Use \$ 75.00 per day • Rockwood Hall \$ 75.00* | <ul style="list-style-type: none"> • Classrooms/Library \$ 25.00* • Whole building use is negotiable by special arrangement. • UCC congregation members may receive a fee discount or a waiver, per decision of Trustees. |
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Number of Persons Expected to Attend: _____

RENTAL FEES

LIABILITY INSURANCE:** Renter is required to provide proof of adequate liability coverage to protect against accidental injury to Renter's employees or volunteers or those attending the event. **UCC will not be held liable for any claims resulting from such injuries. Renter must provide a Certificate of Insurance naming the UCC as additional insured by _____ (Enter date documents must be provided).**

_____ Date application approved
_____ Date application denied; reason: _____

***Flat rates for each rental of between 1-4 hours.**

****Liability fee is \$115 paid to UCC; UCC pays the insurance company.**