

**Request for Use of Church Facilities**  
**Clairmont Presbyterian Church**  
1994 Clairmont Road, Decatur, GA 30033

Complete this form and return to church office, E-Mail to churchoffice@clairmontpres.org  
or you may FAX to 404-321-5057. Please call 404-634-3355 for any questions or additional information.

**Smoking, possession of illegal drugs and weapons and the use of alcoholic beverages on the campus grounds and in the church buildings is specifically prohibited.**

Date submitted \_\_\_\_\_

Requestor's name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Address \_\_\_\_\_

E-Mail address \_\_\_\_\_

Group or organization name \_\_\_\_\_

Reason for request (how do you intend to use the facility)? \_\_\_\_\_

Facility requested\* \_\_\_\_\_

Date of use \_\_\_\_\_ Time of event \_\_\_\_\_ No. participating \_\_\_\_\_

When will you arrive? \_\_\_\_\_ Depart? \_\_\_\_\_

Name of responsible person present during use \_\_\_\_\_ Age 21 or older Yes \_\_\_ No \_\_\_

Tel no. \_\_\_\_\_ E-Mail address \_\_\_\_\_

Estimated time to set-up \_\_\_\_\_ Breakdown \_\_\_\_\_

List any specific needs or equipment \_\_\_\_\_

Is group or organization incorporated? \_\_\_\_\_

Is group or organization profit making or non-profit? \_\_\_\_\_

Does your group or organization have General Liability Insurance that would apply during use of facility?

No \_\_\_ Yes \_\_\_ amount of \$ limits \_\_\_\_\_. If so, will you provide a certificate naming Clairmont Presbyterian Church as an additional insured? \_\_\_\_\_

If not insured, you may be required to sign an indemnification and hold harmless agreement for any injuries, damage or loss of property while using Clairmont's facilities.

There may be a Facility Use Fee assessed. If so, you will be notified upon approval of your request. Any specific church requirements or limitations will be provided at that time.

Signature of requestor \_\_\_\_\_

**NOTE:** Use of church buildings and facilities is governed and authorized as stated in the Clairmont Facility Use policy.

\*Kitchen may not be used for preparing meals, except through the employment of an authorized caterer.  
Call the church office for details.

For CPC use: Facility assigned \_\_\_\_\_ Fee amount \_\_\_\_\_