

# Sports & Rec Center (SRC) Reservation Form

Date of Event \_\_\_\_\_ Time of Event \_\_\_\_\_ Type of Event \_\_\_\_\_

Church Sponsored Event? (Sunday school, Methodist Men, etc.) \_\_\_\_\_

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## Reservation Fee Structure

### Church sponsored events during normal SRC operation hours:

- No charge

### Church sponsored events after hours:

- No charge \*\*Staffing fees will apply

### Non-Church sponsored events:

- Gym \$50/hour
- Loft \$25 (NO food or drink permitted in the LOFT)
- S126 \$25/hour

**\*\*Events held after hours will incur additional fees for staffing**

**\*\*Events requiring custodial set-up will incur additional fees**

Name: \_\_\_\_\_ Member of CUMC: Yes \_\_\_ No \_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Total number of guests attending: \_\_\_\_\_ Adults: \_\_\_\_\_ Children: \_\_\_\_\_

Brief description of party plans: \_\_\_\_\_

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Outside entertainment scheduled: Yes \_\_\_ No \_\_\_      Use of sound system: Yes \_\_\_ No \_\_\_

**Room**

Request(s): \_\_\_\_\_

**Special**

Request(s): \_\_\_\_\_

**Party Agreement**

**When a reservation is made we require a deposit of 50% to be paid in order for the event to be put on the CLC calendar. All fees must be paid in advance of event. If event is canceled with less than 14 days notice the deposit is lost. If late cancellation is due to illness, deposit may be applied to a new date. A waiver must be signed before use of this facility may be granted.**

**I \_\_\_\_\_, the undersigned, have read, understand, and agree to the terms stated on this form for my usage of this facility and for the services rendered.**

**Total Facility Rental Fee \$ \_\_\_\_\_**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

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For Office Use:

Deposit and signed agreement received: Date \_\_\_\_\_ By : \_\_\_\_\_ \$ \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_

Additional Payment: Date \_\_\_\_\_ By: \_\_\_\_\_ \$ \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_

Final Payment: Date \_\_\_\_\_ By: \_\_\_\_\_ \$ \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_