Today's Date_____

Meeting Room only:	Non Profit	Family	For Profit	Paid Check#/Cash_____
All day	$100	$150	$200	Fee or Waiver _____
4 hours or less	$75	$100	$150	Cleaning/Damage Deposit_____
Kitchen (In addition to or separate)	$75	$100	$100	Scheduled/Door Code_____
Cleaning/Damage Deposit	$100	$100	$100	Refundable Deposit Returned_____

Fees shall be paid in advance. **Checks payable to Spirit of Grace Church.** Fees may be adjusted or waived for non-profits or events that directly support the hunger related ministries of FISH and Spirit of Grace Church. Use of the facility will include the use of tables, chairs and audio visual equipment in the meeting room. Room capacity is 100. Groups are expected to complete the check list in order to receive the cleaning deposit back. The organization using the facility assumes responsibility for any damages that may occur while using the facility.

Event Title_____Organization_____

Number of people expected_____Purpose_____

Event Date _____   Time_____

Open to public?_____   Admission? _____

Contact Name_____Phone_____

Email_____

Additional requests or comments (if using kitchen name of food handler permit holder)

_____

_____

Above named person and/or signer will be responsible for any damage to the facilities as a result of the event. Enclosed check out sheet must be completed. Until this signed application and deposit has been received and approved, the reservation is not considered confirmed. *I have read and agree to the attached policies for the use of the FISH facilities.*

Print name_____ Signature_____

Day of Event Only Contacts: Celeste P. 541-645-4503   Debby C. 541-399-2384

Submit to: schedulingfishkitchen@gmail.com or mail to Spirit of Grace Church, 1140 Tucker Rd, Hood River, OR 97031. Church Office 541-386-3993

July 2021