

**LUTHERAN CHURCH OF THE MASTER  
FACILITY USE REQUEST FORM**

Lutheran Church of the Master (LCM) will permit, free of any rental payments, the use of its facilities when the building is open. A fee will be assessed for use before or after regular building hours. See the back of this form for building hours and fees.

**Applications should be submitted a minimum of 30 days prior to use.** Deliver all applications to the church office receptionist (2617 S. 114<sup>th</sup> Street, Omaha, NE 68144). All requests are subject to cancellation based on LCM ministry needs.

Please either type or print in blue/black ink.

Group or Individual Name: \_\_\_\_\_ hereby makes application for use of church facilities below:

\_\_\_\_\_ Use for one time/event only.

\_\_\_\_\_ Continuous use request – This request will need to be renewed annually

Requested facility location:

East Campus(114<sup>th</sup> & Center): \_\_\_\_\_ West Campus(180<sup>th</sup> & Dodge) \_\_\_\_\_ No preference \_\_\_\_\_

From: \_\_\_\_\_ a.m./p.m. Day: \_\_\_\_\_ Date: \_\_\_\_\_

To: \_\_\_\_\_ a.m./p.m. Day: \_\_\_\_\_ Date: \_\_\_\_\_

Event/meeting purpose: \_\_\_\_\_

Is this a non-profit organization? \_\_\_\_ Yes \_\_\_\_ No

Are you planning on charging any fees? \_\_\_\_ Yes \_\_\_\_ No

Please explain. \_\_\_\_\_

Estimated Attendance: Number of adults \_\_\_\_\_ Number of youth \_\_\_\_\_

The contact person below is a member of the above stated group and will be in attendance at this event for the entire period. I agree to assume financial responsibility for any damage to facilities or equipment resulting from our church use.

Signature \_\_\_\_\_ Print name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**REPLACEMENT, REPAIR**

Actual cost of repair or replacement will be charged for damaged facilities, property or equipment.



--- CONTINUED ON BACK ---

*"Let this be written  
for a future generation,  
that a people not yet created  
may praise the Lord"*

**CHURCH REGULATIONS**

1. **No smoking and no alcoholic beverages on church property, which includes the parking lot.**
2. Use or movement of LCM soundboard, musical equipment and other equipment must be approved. Arrangements must be made for operation or training on all requested equipment.
3. Only not-for-profit groups may use the church facilities. Any group or business charging admission or entry fees may not use the church facilities. This includes events held for personal gain.
4. Each group is responsible for leaving the building in a reasonable state of cleanliness and order (as clean as you found it).
5. The church reserves the right to cancel a reservation made by an outside group.
6. Disclosures must be made to LCM regarding any situation or activity that would put LCM or its parishioners at risk.
7. Reservations that do not fall within LCM regular building hours (see below) will be assessed a fee. This fee pays for a Lutheran Church of the Master Event Host to unlock and/or lock the church facilities. The Event Host will be present in the building to assist with needs that may arise. The fee is \$20 plus \$15 multiplied by the number of hours the building will be used. (Example: The fee for three hours of usage would be \$65) Checks should be written to Lutheran Church of the Master and received in the church office two weeks before the event.
8. Soundboard operator (which includes running for use of mic, screens, etc.) will have an honorarium of \$75. Honorarium does not apply if an LCM pastor runs the equipment.

East Campus building hours: Mon-Thurs 8 a.m.-9 p.m.; Fri 8 a.m.-4:30 p.m., Sat 8:30 a.m.-6:30 p.m.; Sun 7 a.m.-2 p.m.

West Campus building hours: Mon - Fri 8 a.m.-4:30 p.m.; Sat 8 a.m.-12:00 p.m.; Sunday 8 a.m.-2:00 p.m.

I have read and understand these policies. By signing, I agree to be responsible for all damages. I understand this reservation form is subject to approval by the church staff and/or church council.

\_\_\_\_\_

Name Date

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**FOR CHURCH USE ONLY**

Date received: \_\_\_\_\_

Received by: \_\_\_\_\_ Position: \_\_\_\_\_

LCM Staff Approval (as needed:) \_\_\_\_\_ Date: \_\_\_\_\_

Board of Trustees Approval (as needed): \_\_\_\_\_ Date: \_\_\_\_\_

After form completion and approval:

\_\_\_\_\_ Copy of church use form provided to the appropriate LCM staff prior to use.

\_\_\_\_\_ Facility Request Form for room/equipment request and set up provided.

\_\_\_\_\_ Facility Request Form for room/equipment request and set up received.

