APPLICATION FOR USE OF UUCGV FACILITY

536 Ouray Avenue Grand Junction, CO 81501 (970) 257-0772 administrator@grandvalleyuu.org		
Person/Organization requesting:		
Nature of organization: 🗆 Social 🗆 Political 🗆 Religio	bus \Box Charitable \Box Educational	
\Box Non-profit \Box Other:		
Person(s) responsible: Name:		
Address:		
Telephone:		
Email:		
Date(s) & time of function:		
Set-up time: Clean-up time: Reservation duration Day(s)/Time (Includes time for setup a	Monthly D Weekly	
Space to be used: Sanctuary (large group capacit Rear of Sanctuary (up to 24 pe Small meeting room (up to 12 Basement (large group capacit Number of Adults Number of Children Supervision of activity (who, how many)	eople) people) ty)	
Nature of activity (movie, speech, meeting, dance, concert	t, wedding, etc.)	
Will admission be charged? \Box No \Box Yes	Items sold? \Box No \Box Yes	
Will food or drink be served? \Box No \Box Yes What?		
Will alcohol be served? \Box No \Box Yes What?		
Will you be using equipment? \Box No \Box Yes Which?		
Please see facility use policy (page 3, # 23 & 24) regardin		
A refundable \$100 cleaning, compliance and damage depo Deposit received in \Box cash \Box check #		
	tion has been approved. Please let our facilities manager know e activity is cancelled less than seven days before the event, a deposit.	
I have received a copy, understand and agree to abide by t		
Signature:	Date:	
Fee: Received in \Box cash \Box check #		
Congregational Sponsor (if applicable):		