## Chríst Church PO Box 1246 New Bern, NC 28563

Жеу #\_\_\_\_\_

252-633-2109

## Covid - 19 mandates will apply until NC removes all restrictions.

## Harrison Center Reservation

Event Title:		Contact Name		ecompleting this form.)
Email:		Phone:		
Contact Address:				
Church Event: Yes	No Outside G	roup _X_ Outreach _	Ministry	Recurring meeting Bi Mo Annual
	Sectio	n A: Calendar Requ	uest Mo	
Date(s):	Start Time(s)	End Time(	s)	
Note: Start and end times ar	e those times you will ac	ctually need access to the	e space(s), not nece	ssarily the times of the event
Name of Group	Expected At	tendance #	_(185 person ma	ximum)
Will you need the use of audio	/visual(A/V) equipment?	Yes No If ye	s, please fill out the fo	rm Audio/Visual Equipment Nee
Is needed the presence Will you need the use of the ki Will alcoholic beverage If alcoholic beverages	of a technician is required tchen? Yes No es be served?Yes are to be served, you m	Kitchen must be left in	manner that it was f	ound.
A deposit of is charg final bill which is <mark>due in full 7 d</mark> An additional charge for the re Building monitor hrsx \$25.6	ged to hold your date an <mark>ays prior to event.</mark> A de quired building monitor v	posit ofwill be ch will be charged at \$25.00	arged for cleaning.	•
Additional charges may be incomonies are spent to return the their own risk. Christ Church is allitter, rice or fog machines. As space, noise must be kept at the company of the company o	center back to a usable s not responsible for inju Vothing to be attached to t a reasonable level. The	state. Not responsible for uries incurred during ever to the walls. This is a con nere is no parking availab	or loss or stolen item it due to negligence ndo building and p	ns. Group rents the facility a on the part of the group. <b>Note</b> eople live above rented
dispose of it per instructions. <mark>L</mark>	inens are not included			
Rental	\$	Deposit Paid \$	Amount Cas	h, Check, <u>Credit</u>
Building Monitor Cleaning Deposit	\$ \$	Date Balance Due \$	 7 days prior to	n event
Kitchen Fees	\$	Payment \$	Amount Casl	n, Check(#)
		Date		. ,
Total Donation for this event	\$			
Signaturo		Data		

This agreement may be terminated at any time if any member of the party is in violation of the terms of the agreement. You may be asked to vacate the premises and your deposit as well as any fees paid will be forfeited for non-compliance.

By signing this agreement you agree to abide by the Harrison Center Use Policy provided to you on this date.