Building Use Form Weddings

Name of Person Requesting use of Chu	urch Facilities:				
Address:		Phone:			
		Requested Da	ate:		
		Time of Event:			
Approximate number of participants of	or guests:				
Pastor Ben Good to Perform Ceremony:	Member:	Non-Member:	\$350		
Wedding Ceremony (Deposit Required) :	Member:	Non-Member:	\$300 \$100 Deposi	t ———	
	Member:				
Sound Booth (1 Tech Day of Wedding Only):	Member:	Non-Member:	\$75		
Streaming or Video (2nd Tech Day):	Member:	Non-Member:	\$75		
Social Hall:	Member:	Non-Member:	\$100		
Kitchen (Additional Deposit Required):	Member:	Non-Member:	\$100 \$100 Deposi	t	
		Todays Date:	·	Deposit Total	Donation Total
Deposit may be returned if facilities are left	in good condition				
			Todays Date:		
Responsible Party:					
			Todays Date:		
Church Official:			Data Daid		
Donation:			Date Paid		
Date Given to Treasurer:					
Please Complete 5 Copies: (1 for each: F	Pastor, Trustees,	Custodian, Seci	retary and Res	sponsible P	arty)
After use of the Church facilities, please The church is not responsible for any mi		personal belon	gings.		
Office Use Only:					
Hall Checked for Reimbursement:)	(Rivers	ide Ch	apel
Church Official:			134 Broad Street Salamanca, NY 14779		
Donosit Potund Dato:	Shock Number		(716	6) 945-2120 Shara (Calar	