HOPE UNITED CHURCH OF CHRIST 141 S. 12th Ave. Sturgeon Bay, WI 54235 (920) 743-2701 hopeucc@hopechurchdc.org

USE OF BUILDING & OUTDOOR SPIRITUAL CAMPUS AGREEMENT FORM - revised 1-5-25

Group/Organization/Name:		
Type/Purpose of Event:		
Date for the request:	Time requested:	Expected attendance:
Group representatives who will b	e present when the building is	s used:
Area(s)/room(s) requested:		
Equipment requested: Over	head Projector/ScreenOrganStove/Over	TV/VCRPortable Microphones nDishwasher
Will children be present?		
(All children mus	st be supervised by an adult at all t	times in the building and on the outdoor campus.)
Please check one of the following	j :	
		r injury, death or property damage that may all campus. Proof of insurance will be
property damage that may occur	during the group use of this b	rist for any claims of injury, death or uilding or outdoor spiritual campus.
Person authorized to waive or pro-	ovide coverage	phono number)
	(Signature and	priorie number)
The organization using the Churc Hope UCC's Building and Outdoor		for policing expectations outlined in the
Signing of this Use Agreement Fo Outdoor Spiritual Campus Use Po		nding that Hope UCC's Buildings and dand agreed upon.
Group contact person(s)		
(sign	nature)	(date)
Contact Information:(phone)		(email)
(address)		
Please make	e your check payable to Hope L	Inited Church of Christ
		mited Charcil of Christ.
Approved by:(Pastor_Administrativ	ve Assistant or Trustee)	(date)
		, ,
Attached is a copy of Hope's Emerg	ency Action Plan. The person in	your group responsible for calling 911 in the
event of an emergency is:		