

SINGLE-USE RENTAL APPLICATION (member and non-member)

ROCK OF AGES LUTHERAN CHURCH
5135 MEMORIAL DRIVE
STONE MOUNTAIN, GA 30083
404-292-7888; FAX 404-292-7889
www.rock-of-ages-lutheran-church.org

RENTAL DATE: _____ EVENT START TIME (including setup): _____ EVENT END TIME (including teardown): _____
[This date is not reserved until your rental application is complete and your deposit is paid. **The full deposit will be retained if setup occurs at a time other than the time indicated above.**]

NAME OF PERSON/ORGANIZATION RESPONSIBLE FOR RENTING/USING FACILITY: _____

ADDRESS: _____

CITY: _____ GA ZIP CODE: _____ HOME TELEPHONE: _____

CELL/BUS PHONE.: _____ EMAIL ADDRESS: _____

TYPE OF FUNCTION: _____

FOOD CATERED: ___ YES (**requires kitchen rental**) ___ NO MUSIC? ___ YES ___ NO

FLORIST AND/OR CATERER DELIVERIES: _____ YES _____ NO

FLORIST/CATERER NAME: _____

NO ALCOHOLIC BEVERAGES ARE ALLOWED AT ANY TIME ON THE PREMISES

RENTAL FEES: MAKE CHECKS PAYABLE TO ROCK OF AGES LUTHERAN CHURCH

SECURITY DEPOSIT: \$ _____ SANCTUARY: \$ _____ CORKISH HALL: \$ _____ LOFT: \$ _____

LOUNGE: \$ _____ ACTIVITIES RM: _____ KITCHEN: \$ _____ CLASSROOM: \$ _____

NURSERY: \$ _____ ROA ORGANIST: \$ _____ SETUP/CLEANING FEE*: \$ _____

I HAVE READ AND AGREE TO ABIDE BY THE POLICIES AND PROCEDURES OF ROCK OF AGES LUTHERAN CHURCH AS THEY APPLY TO THE USE OF THEIR FACILITIES:

NAME [PLEASE PRINT]

RENTER SIGNATURE

DATE: _____

* ROA's custodian may be hired for cleaning services post-event for \$100. Pre-event setup is available for an additional \$50 fee. Renter is responsible for making custodian payment on the day of the event.