



College Grove United Methodist Church

PO Box 216 8568 Horton Highway
College Grove, TN 37046

GUMC FELLOWSHIP HALL USAGE AGREEMENT

Name: _____

Address: _____

Phone: Home: _____ Cell: _____

Church Official: _____ Home: _____ Cell: _____

Purpose of Use: _____

Approximate Number of Attendees: _____

Fee Information: _____

Extra Time Required for Set-Up: Date: _____ From: _____ To: _____

Person Responsible Regarding Set-Up/Regarding Duties and/or Restrictions: _____

Name: _____ Home: _____ Cell: _____

Set-Up- Date: _____ From: _____ To: _____

Special Requests or Provisions: _____

.....

Useage Fee: _____ Date Due/Received: _____ Church Contact: _____

Refundable Deposit: _____ Date Due/Received: _____ Date Refunded: _____

Balance Due: _____ Other: _____

Sign Off: _____ Date: _____