

Canton Lutheran Church
Building Use Reservation Form

Planned Event: _____

Date/Times: _____

_____ Member CLC

_____ Non-Member

_____ For Profit Entity

_____ Non-Profit Org.

Name: _____

Address: _____

Telephone (Daytime): _____

Payment should be received 30 days in advance of event. Make checks payable to Canton Lutheran Church. Space will not be confirmed until reservation form and payment is received. Repair of damage to the church facilities or grounds will become the responsibility of the individual or group.

Signature

Fee Enclosed: \$ _____

_____ Classroom

_____ Fellowship Hall

_____ Chapel

_____ Sanctuary

_____ Library