

Request for Use of Space

office@firstchurchboxford.org 978.887.5841 PO Box 326 4 Georgetown Road Boxford, MA 01921

Please fill out this form and return to First Church Congregational Boxford either by mail or email along with a signed Terms and Agreement of Use Form. We will reply within seven days as to whether First Church facility is available for your event.

Date:					
Name of Ministry/Organization:					
Event Name:					
	Event Day of the Week:				
Setup Time: Start Time:	Stop Time:	Cleanup Finish Time: _			
Number Attending: Adults: Teens:	Children:	_			
(Note that large events may require police n	otification and/or preser	ce at an additional cost)			
Purpose and Description of Event:					
Space Required					
Family Life Center					
Main RoomClassroom	KitchenBa	ck Classroom			
Additional Notes on space needs					
- 					
If First Church staff is setting up the s	space, please include a ro	om layout sketch with this form	, including		
number of tables, and number of cha	airs at each table. Please	note, there is a sexton fee for F	CCB setup.		
First Church					
SanctuaryNursery	Library Classroo	m Number(s)Youth Room	Other		
Additional Notes on space needs					

Technology Nee	ds: (to be set up with the First Church Tech Team separately and will be invoiced separately)						
Aı	udio TechnicianVideo TechnicianPPT/Video PresentationPlay CD Music						
#	of Handheld Microphone(s)# of Lapel Microphone(s)Overhead Projector						
Li	ve Music/own equipmentLive Music/FCCB equipmentPodium # of Music Stands						
How v	vill your event utilize the equipment?						
-							
Kitchen Needs (please check where appropriate)						
_	Event will be catered by an outside caterer						
_	Food will be prepared by event group.						
_	Kitchen equipment (stove, refrigerator, dishes, silverware, etc.) to be used						
-							
Contact Information	ition						
Event Contact:							
Street Address:							
City:	State/Zip						
Email Address:_							
Cell Phone: _	Home Phone:						
If billing name a	nd address differs from the contact information, please include below						
Billing Name:							
Street Address:							
	State/Zip						
Email Address:_							
Cell Phone: _	Home Phone:						

Thank you!

NOTES:

There are various fees for space and provisions for events at the First Church property. Please note them on the attachment.

A \$200 security deposit is required for all rentals. 50% of the total rental fee is required to hold a reservation and the remaining balance is due 14 days prior to the event.



Fee Schedule for Use of Space

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Fee Schedule for active members of First Church Boxford and nonprofit organizations located in Boxford.

Family	Life Center					
	Large Hall	\$200 for total 4 or less hours	\$25/hour over 4 hours			
	Small Room	\$50 for 1 or less hours	\$25/hour over 1 hour			
First C	hurch Building					
	Sanctuary	\$50 per hour				
	Wedding	\$200 flat rate				
	Funeral	\$100 flat rate				
	Coggin Room	\$25 per hour				
	Vestry	\$25 per hour				
Sextor	1					
	If a sexton is required for setup and take down, he will invoice separately.					
Audio	Video Equipment Usage					
	Available A/V equipment Must be arranged with an FCCB technician.					
	Technician	Must be arranged with an FCCB technic				
	All events - \$50 Rehearsal - \$25 Recording - \$25					
	If an event is recorded, copies can be provided on DVD for \$5.00/ea, no limit.					
	All A/V charges will be invoiced	•				
Vitcho	n and Equipment Usage					
NILLITE	Use of stoves	\$10 0				
	Catered event	\$25				
	Calcicu everil	72 <i>3</i>				