



Space User Agreement: PARKING LOT & GROUNDS

Our Lady of the Assumption Catholic Church (Page 1 of 5)

This document must be filled out by all persons/ministries that book the Parking Lot/Grounds at Our Lady of the Assumption Catholic Church.

Page Two of this agreement includes the required Meeting Space Checklist. OLA Facilities personnel will assist with set-up/break-down as they are available. Due to the busy schedule on campus, OLA staff may not be available for set-up/break-down. Please plan to have volunteers provide set-up/break-down when possible.

Pages 3-5 of this agreement include diagrams of our campus. Use these pages to create a diagram of the requested set-up. Please note that set-up by our facilities staff is not always possible.

The agreement and diagram must be signed and returned to Bryan Shepherd, Director of Campus Facilities at bshepherd@olachurch.org at the parish office no later than TWO WEEKS prior to the date of the event. Set-up requests are not guaranteed.

Only the Original Form or Scanned PDFs will be accepted. No Photos.

Name of Event: _____ Date of Event: _____
Ministry: _____ Contact Name: _____
Phone: _____ Ministry
Email: _____

Set-up Date/Time: _____ Door Unlock Time: _____

Event Start/End Time: _____ Door Lock Time: _____

of People Expected: _____

Frequency of Meeting: One Time ____ Recurring ____ If recurring, list start date: _____

SPACE SPECIFICS

Capacity: Variable

Configuration: Tables, Chairs, and Tents are available in a limited capacity.

Notes: The Church is not to be accessed during any event held in the parking lot and surrounding area.

The Garden of Memories is not to be accessed during any event held in the parking lot and/or surrounding area.



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Please initial each item acknowledging the following:

- _____ If Alcohol is being served, the Serving Alcohol Checklist will be turned in to the Business Manager, Jim Schweizer (jschweizer@olachurch.org) 2 weeks prior to the event along with this form. Request for a police officer must be submitted to Anne Stephens via the online link (www.olachurch-forms.org/policy-officer-request) one month prior to the event. (\$100/hr. 3 hour minimum Subject to change.)
- _____ No drugs, smoking, vaping, illicit substances, guns, or weapons of any kind are permitted.
- _____ If children are present, they will be supervised at all times to ensure their safety and the cleanliness of the space. Children will NOT be allowed on either playground or turf field.
- _____ Adult to youth ratio:
 - o 18 – 36 months: 2 adults to 12 children
 - o 3 – 4 years: 2 adults to 12 children
 - o 5 – 10 years: 2 adults to 16 children
 - o Junior High School: 2 adults to 16 youth
 - o High School: 2 adults to 20 youth
- _____ No glitter will be used. No permanent markers will be used. Arts & Crafts require the use of a plastic table cloth, supplied by the ministry.
- _____ The space will be left in the same – or better – condition than prior to the event.
- _____ If food and beverage are served, tables will be wiped down. Chairs will also be wiped down as needed.
- _____ Tables and chairs will be put up in the appropriate storage area.
- _____ The Church will not be accessed.
- _____ The Garden of Memories will not be accessed.
- _____ The Preschool Playground will not be accessed.
- _____ Trash, if any, will be emptied taken to the dumpster across from the turf field. (Not left in the one outside the kitchen door.)
- _____ Bathrooms (the church bathrooms are not accessible) will be checked at the end of the event to ensure they are in good condition.
- _____ All food and beverages (especially alcohol) must be removed from the premises at the conclusion of the event. (Food left in the Moylan Hall kitchen or refrigerator will be thrown away.)
- _____ Laundered tablecloths will be returned to the parish office within 3 days of the event.
- _____ In the event of injuries, after providing the appropriate medical care, Jim Schweizer, Business Manager, at jschweizer@olachurch.org will be contacted to submit an *Archdiocesan Accident/Injury Report* immediately following the incident.
- _____ In the event of damages Jim Schweizer, Business Manager (jschweizer@olachurch.org), and Bryan Shepherd, Director of Campus Facilities (bshepherd@olachurch.org), will be notified immediately.

Ministry Leader Signature

Date

Thank you for adhering to these policies! Working together, we can keep our parish and schools in good shape, sparkling clean, and ready for the next group who will use the facilities!

Keep a copy of this document for your records.



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Set Up Request UPPER PARKING LEVEL

Please note that this is only for the parking lot. If Moylan Hall is also booked, a separate agreement must be submitted.

Name of Event: _____ Date of Event: _____

Ministry Name: _____

Leader: _____ Contact Info: _____

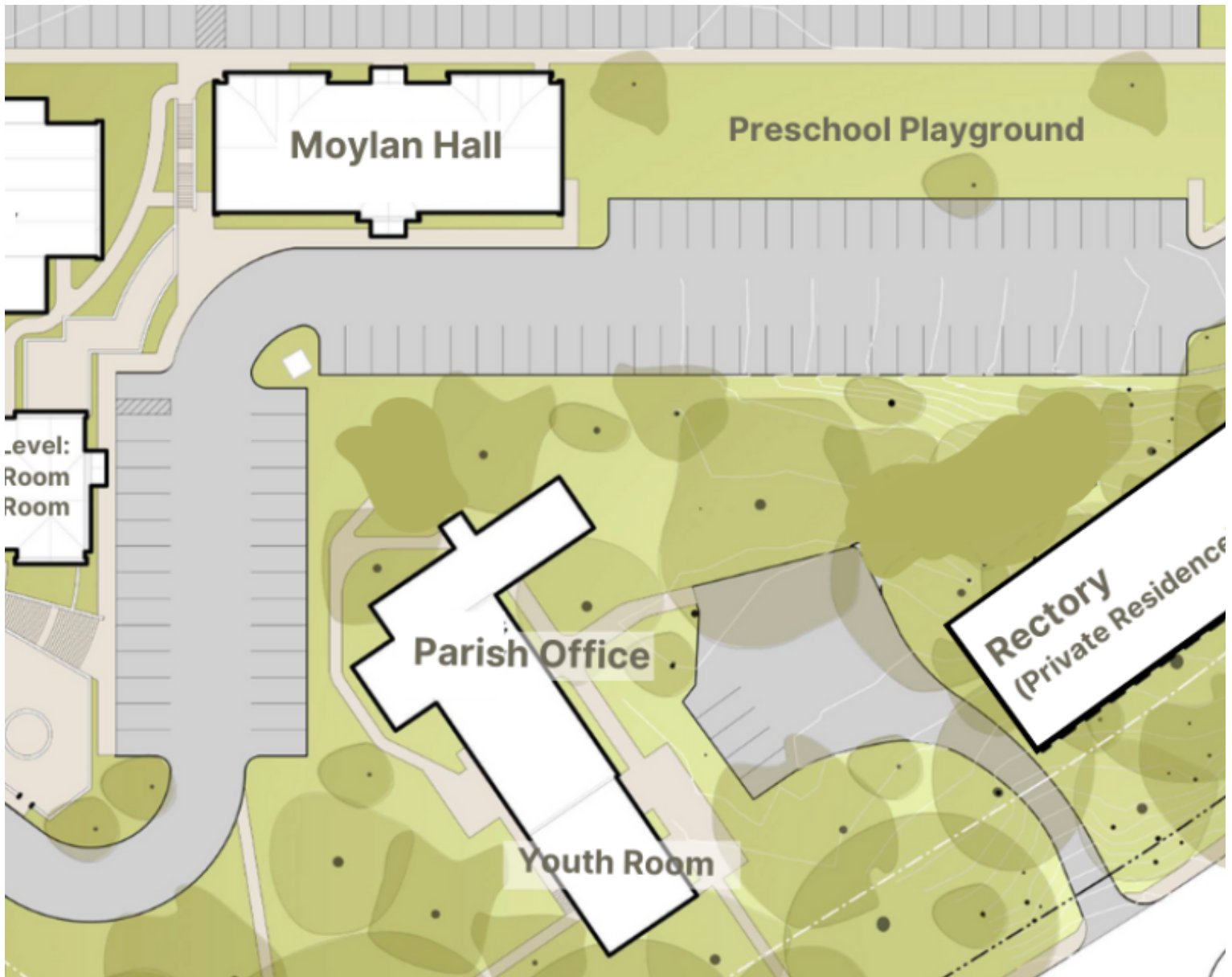
_____ Initial here if set-up assistance is requested. (I acknowledge that facilities staff is not always available for set-up.)

_____ Initial here if set-up assistance is NOT requested.

Set-Up Requested

of Round Tables Requested: _____ # of Round Tablecloths Requested: _____

of Rectangular Tables Requested: _____ # of Rectangular Tablecloths Requested: _____





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Set Up Request LOWER PARKING LEVEL (Church Side)

Please note that this is only for the parking lot. If Marist Hall is also booked, a separate agreement must be submitted.

Name of Event: _____ Date of Event: _____

Ministry Name: _____

Leader: _____ Contact Info: _____

_____ Initial here if set-up assistance is requested. (I acknowledge that facilities staff is not always available for set-up.)

_____ Initial here if set-up assistance is NOT requested.

Set-Up Requested

of Round Tables Requested: _____ # of Round Tablecloths Requested: _____

of Rectangular Tables Requested: _____ # of Rectangular Tablecloths Requested: _____





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Set Up Request LOWER PARKING LEVEL (School/Preschool Side)

Please note that this is only for the parking lot. If Marist Hall is also booked, a separate agreement must be submitted.)

Name of Event: _____ Date of Event: _____

Ministry Name: _____

Leader: _____ Contact Info: _____

_____ Initial here if set-up assistance is requested. (I acknowledge that facilities staff is not always available for set-up.)

_____ Initial here if set-up assistance is NOT requested.

Set-Up Requested

of Round Tables Requested: _____

of Round Tablecloths Requested: _____

of Rectangular Tables Requested: _____

of Rectangular Tablecloths Requested: _____

