

FACILITY USE HANDBOOK

Approved by the Board of Directors on 1/23/24.



IMPORTANT FACILITY USE INFORMATION

SERVING OUR COMMUNITY

We believe that our campus, buildings, and facilities are a blessing to our congregation and to the community around us. We are a congregation being shaped by Christ to Serve. This handbook and agreement are designed to give users information on how our facility may be used and serve others in the support of the mission of Christ in this place.

Please note, approval of the use of our campus and facilities does not constitute or imply endorsement of a group, their mission, or their positions. Groups approved to use our facilities must not advertise the event in such a way as to imply endorsement by the congregation. No activities or advocacy may take place within our buildings or by groups which conflict with the constitution, bylaws, and practices (mission/values) of this congregation. We appreciate the opportunity to serve you.

STEPS FOR GROUPS TO USE THE FACILITY

1. Review the Facility Use Handbook.
2. Complete the Facility Use Application attached to this handbook.
3. Return to the Church Office the following items: The Facility Use Application, a check for the Registration Fee, and a check for the Security Deposit. Your event will not be scheduled until each of these items are turned into the Church Office. *If requesting use as an organization, you will be asked to provide your 501(c)(3) Determination Letter as well as your certificate of liability insurance.*
4. Upon return of the Facility Use Application, your request will be evaluated, and you will be notified if your application has been approved or not.
5. Only equipment that is a part of the room being used, will be available to the group occupying the room as designated on the Facility Use Application. If there is something you are unsure of, please note a request under the *Additional Information* piece of the application.
6. A key fob will be handed out to those granted permission of the rooms. These can be obtained the day before the event from the Church Office. The key fob will need to be returned upon completion of usage time.
7. The security deposit will be returned upon completion of the *Post-Use Checklist* by the Head Custodian and key fob returned to the Church Office.

FINAL DECISIONS

In case of doubt or uncertainty by any outside person or group about the Facility Use Application or interpretation of these policies, or in our customary practices not specifically mentioned here, the Lead Pastor shall decide the matter. All individuals and groups shall abide by the Lead Pastor's directions or forfeit immediately the use of any part of the facility.

REFUNDS

Refunds will be provided if an event is cancelled due to a scheduling conflict of the Organization or when the external groups need to cancel their planned event. Prior to any refund being returned, all key fobs and/or keys will need to be returned.

GROUPS

We are happy to serve the community by allowing them use of our facilities. We make a distinction between internal groups and external groups. Priority will be given to the internal groups. All groups need to submit a Facility Use Application to use our facility.

Internal groups are considered as any group or individual whose function or purpose is sponsored or directed by SJL (ex. Youth groups, SJL sporting leagues, LWML, Well-seasoned, Boy Scouts of America, Craft Fair, School Play, LTAA, etc.)

External groups are considered as any group or individual whose function or purpose is not sponsored or directed by SJL (ex. Non-SJL Sporting leagues & events, Lutheran High School, PABA, Jr. Crusaders, Community Groups, Baby or Wedding showers, etc.)

All groups should apply for use of the facility at least 30 days prior to the event.

ROOMS AVAILABLE FOR USE

- | | |
|------------------------------------|------------------------------------|
| 1. Gymnasium | 6. Music Room (Internal Only) |
| 1. Cafeteria Only | 7. Classrooms (Internal Only) |
| 2. Cafeteria and Kitchen | 8. Library (Internal Only) |
| 3. Fellowship Hall and Kitchenette | 9. Conference Room (Internal Only) |
| 4. West Parking Lot | 10. Green Space (Internal Only) |
| 5. Sanctuary (Internal Only) | |

STARTING AND ENDING TIMES FOR EXTERNAL GROUPS

- Monday through Friday from 8:00 a.m. through 8:00 p.m.
- Saturday from 8:00 a.m. through 1:00 p.m., except Gym 4:00 p.m.
- No external group rentals on Sunday.

The building must be completely cleared no later than 8:00 p.m. (or 1:00 PM. on Saturdays) to allow the building to be closed promptly and properly. Exceptions to these times must be approved in advance and will be subject to a custodial surcharge.

FREQUENCY OF USE

Typically, external groups are limited to use of our facility, one time per week, 1 ½ hours at a time. Exceptions can be made for sporting camps or requested through the Facility Use Application.

SCHEDULING CONFLICTS

The Organization reserves the right to pre-empt any facility use for its own use, such as, but not limited to, funerals or changes to scheduled Sporting Events. Notice will be provided as early as possible by the Church Office.

ROOM SETUPS

Most rooms have a standard setup. Please specify any changes to those standard setups on the Facilities Use Application.

REGARDING BREAKAGE

All persons and/or groups using St. John Lutheran Church and School's (the Organization) facilities are expected to exercise reasonable care and judgment in such use to prevent defacement, damage, or breakage. The contact person(s) signing the application for use shall be responsible for paying costs incurred by the Organization in cleaning, repairing, or replacing any part of the building or its furnishings and equipment which in the judgment of the Facilities Manager has been carelessly or irresponsibly subjected to more than normal wear and tear by the person(s) or group involved. This amount may be subtracted from the Security Deposit.

NO SMOKING

All members of all groups using our facilities shall abide by a *no smoking* rule in all parts of the building, including corridors, entrances, and restrooms. Violation of this rule is sufficient ground for a staff member to withdraw immediately any group's use of the facilities and/or to deny use in the future.

NO ALCOHOL AND DRUGS

The serving, consumption, or use of alcoholic beverages, marijuana, or narcotics shall not be permitted at any time on our Organization's property, including the outdoor courts and parking lots.

NO GAMES OF CHANCE

We prohibit the use of games of chance or gambling on campus by external groups. This would include such activities as raffles or lotteries.

FOOD AND DRINK

There is no food or drink allowed in the Gymnasium, Sanctuary, Music Room or School Library except water bottles. All other food and drink requires approval in advance as noted in the Facility Use Application.

ANIMALS

No animals other than service animals are allowed in the Organization's facilities.

DECORATIONS

Decorations may be attached to the walls, doors, and light fixtures with masking tape only. No decorating is permitted in the hallways. All decorations used must be removed immediately and completely following the event. No helium balloons are allowed. If a helium balloon is discovered at the ceiling, which will require our Head Custodian to obtain a lift for removal of said balloon, \$20 will be deducted automatically from the Security Deposit.

RECYCLING

Recycling is a policy of our Organization. Recycling containers are available for your use. Every group is responsible for complying with this policy.

LIGHTS

All lights should be turned off when the building is vacated.

STORAGE

All external groups using the facility will be responsible for storing props and accessories offsite.

BICYCLES AND SKATEBOARDS

No bicycles or skateboards are allowed inside the Organization's facility. Bicycle racks are provided at the West Parking Lot.

PARKING

Parking is available only during the period of time that a group has contracted to use the facility. Parking is available on a first-come, first-served basis and excludes the Staff Lot on Stafford Street which is always reserved for staff of the Organization. Any damage to vehicles is at the owner's expense. The Organization is not responsible for theft or damage to personal property.

SECURITY

Our Organization works to maintain a safe and secure environment within the facility, however, no systems are foolproof. We ask that all users pay close attention to personal property and valuables, not leaving them unattended. The Organization is not responsible for theft or damage to personal property. If doors are left unlocked, this may result in no further use of the facility as we need to maintain a secure facility due to the operation of our school.

EQUIPMENT

Internal groups are free to use the equipment of our building. External groups are required to provide their own basketballs, volleyballs, and other sporting equipment. An additional security deposit is required if the volleyball net needs to be used. See Facility Use Application for more information.

IN CASE OF EMERGENCY ON THE DAY OF THE EVENT

If an emergency occurs call 911 immediately and then notify the appropriate parties of the Organization. Please call in this order and leave a message with a brief summary of the emergency. Please call until you can speak to someone on the phone:

*** Call 911**

1. Head Custodian, Randy Lusty, (262) 617-3346
2. Board of Trustee Chairman, David Karsten, (920) 892-4569
3. Pastor John Schultz, (618) 972-3914
4. Pastor Andrew Thompson, (319) 213-1199

After making the appropriate contacts we ask that you fill out the incident report (attached in the Appendix) so that we have documentation of what occurred. If you would need to fill out the incident report, we would ask that it is returned with the key fob you were given prior to receiving your security deposit back.

FACILITY USE APPLICATION

NAME OF PERSON OR GROUP REQUESTING _____

STATUS OF PERSON/GROUP REQUESTING USE ☐ Internal Group ☐ External Group

DATE OF RENTAL/FACILITY USE _____

PURPOSE/EVENT _____

GROUP ARRIVAL TIME _____

GROUP DEPARTURE TIME _____

TIME EVENT BEGINS _____ TIME EVENT ENDS _____

RECURRING EVENT? ☐ Yes ☐ No If yes, how often: _____

ADDITIONAL DATE REQUESTED (EX. REHEARSAL, DECORATING, SETUP) _____

GROUP ARRIVAL TIME _____

GROUP DEPARTURE TIME _____

ESTIMATED NUMBER OF ATTENDEES _____

SPECIAL ROOM SETUP REQUIRED? ☐ Yes ☐ No If so, explain in the space below

CONTACT PERSON INFORMATION

Name (First and Last): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone(s): _____ E-mail: _____

ALTERNATE CONTACT PERSON INFORMATION

Name (First and Last): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone(s): _____ E-mail: _____

CHECK THE BOX NEXT TO ROOM REQUESTED	External Groups	Internal Groups
☐ Gymnasium	\$10/Requested Use*	No Fee
☐ Cafeteria Only	No Fee	No Fee
☐ Cafeteria and Kitchen	No Fee	No Fee
☐ Fellowship Hall/Kitchenette	No Fee	No Fee
☐ West Parking Lot	No Fee	No Fee
☐ Sanctuary		No Fee
☐ Music Room		No Fee
☐ Classroom		No Fee
☐ Library		No Fee
☐ Conference Room		No Fee
☐ Green Space		No Fee
☐ Registration Fee (required)**	\$100	No Fee
☐ Security Deposit (required)	\$100	No Fee

TOTAL FACILITY USE FEE _____

All fees charged are for the express purpose of recovering costs associated with ministering to groups by making our church facility available and not for the intent of making a profit.

* Gymnasium Fee is \$10/requested use up to \$500 in the Fiscal Year (July to June). If the volleyball net is required, an additional \$100 is required with the security deposit. You are also required to get the appropriate training on how to set up the volleyball net.

**Registration Fee covers time spent reviewing application and determining if the event will work in the schedule, meets our mission, etc. This is non-refundable unless entire event is cancelled.

Example Of a Potential Request: Application to use the gym for a practice once a week for 7 weeks. Your total would be \$100 for Security Deposit, \$100 for Registration, and \$70 for use of the Gym. A total of \$270 would be cashed, and the \$100 would be returned granted the gym is well taken care of by your group.

SIGN THE AGREEMENT

I have read the Facility Use Handbook information and rules and regulations and agree to the terms and regulations pertaining to the rental and use of the facilities and equipment of the St. John Lutheran Church and School and agree to pay the fees as outlined above. As the user, I will be held personally responsible for paying for any repair and/or replacement costs for damaged property or equipment.

PRIMARY CONTACT SIGNATURE

DATE SUBMITTED

FOR OFFICE USE ONLY

Approved and Placed on Calendar

Initial: _____

Date: _____

Informed Applicant

Initial: _____

Date: _____

INSPECTION CHECKLIST

Please complete this form and return it with the fob key to the Church Office. You may write additional comments on the back of this form. Your security deposit will be mailed to you. The renter is responsible for all items contained in this Agreement. Failure to abide by and carry out responsibilities could lead to withholding part or all the Security Deposit.

Renter: _____ Date: _____

Pre/Post-Event Review of Room Rented		
	Review of Room by Renter	Post-Event Review of Room by the Organization
General cleanliness of room rented		
Tables and chairs put away neatly (if applicable)		
Floor Clean		
Restrooms are Clean		
No garbage left in the room rented		
Lights turned off		
Windows/Doors closed and locked		
Discrepancies:		

Cleaning Directions	
Wash tabletops.	
Place chairs neatly around tables.	
Sweep hard floor.	
Remove all decorations, including tape.	
Wash, dry and put away all dishes used.	
Remove all food that you brought into the facility	
We Recycle. Please place recyclables in the proper containers.	
Check restrooms.	

FOR OFFICE USE ONLY			
Key Fob Returned	☐ Yes ☐ No	Informed Group	
Release Security Deposit	☐ Yes ☐ No	Initial: _____	Date: _____
Forfeit Security Deposit	☐ Yes ☐ No		

ACCIDENT REPORT FORM

Complete this form for injuries more severe than minor cuts and scrapes.

Person Injured _____ Age _____ Sex ☐ M ☐ F

Date of Accident: _____ Time: _____ AM PM

Person completing this form: _____

Describe Accident And Injury:

INJURY		LOCATION		BODY PART INJURED	
Cut/ Puncture	Concussion	Classroom	Gymnasium	Knee R / L	Leg R / L
Fracture	Burn	Hallway	Parking Lot	Wrist R / L	Hand R / L
Bruise	Sprain/ Strain	Bathroom	Playground	Neck	Teeth
Dislocation	Bloody Nose	Cafeteria	Stairs	Eye R / L	Nose

Describe how the injury occurred: (Attach additional description as necessary or use back of form)

Was the injured: ☐ Given first aid ☐ Referred to a physician ☐ Sent to hospital
☐ Released to a parent

Was parent/guardian contacted about the accident? ☐ Yes ☐ No By Whom _____

Was first aid administered? ☐ Yes ☐ No By Whom _____

Describe first aid given:

Witnesses (Name, Phone)

