

# Candlelight Christian Fellowship

## Property Equipment Request Form & Policy – Deposit will be required

Request must be submitted 4 weeks prior to event

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work or Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Event: \_\_\_\_\_

Address of Event: \_\_\_\_\_

Property Equipment Pick-up Date: \_\_\_\_\_ Pick-up Time: \_\_\_\_\_

Property Equipment Return Date: \_\_\_\_\_ Return Time: \_\_\_\_\_

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_

1. Those who borrow property equipment from Candlelight Christian Fellowship assumes full responsibility for picking-up, transporting, using and returning as pre-arranged with the church staff.

3. Those who borrow property equipment from Candlelight Christian Fellowship assumes responsibility for loss, theft and damage to said property and will notify Candlelight Christian Fellowship Facility Department of any problems, damages, wear and tear.

4. Persons borrowing church property equipment agree to hold harmless and assure Candlelight Christian Fellowship, Candlelight Fellowship, Inc., Candlelight Outreach Ministries, Inc. DBA Skate Plaza CCF, and all related employees, staff, the board of directors, and members against all claims or losses arising out of use of the church property equipment.

I \_\_\_\_\_ the borrower of the property equipment listed on this form from Candlelight Christian Fellowship, agree to abide by all the policies pertaining to borrowing church property equipment as stated above.

\_\_\_\_\_

**Print name of responsible person**

\_\_\_\_\_

**Signature of responsible person**

\_\_\_\_\_

**Date**

↓ (Office Use Only) ↓

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_ Model /Serial #: \_\_\_\_\_

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_ Model /Serial #: \_\_\_\_\_

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_ Model /Serial #: \_\_\_\_\_

Property Equipment Requested: \_\_\_\_\_ QTY: \_\_\_\_\_ Model /Serial #: \_\_\_\_\_

Approval Date: \_\_\_\_\_ Deposit Amount: \_\_\_\_\_

Staff Printed Name: \_\_\_\_\_

Staff Signature \_\_\_\_\_

Notes \_\_\_\_\_