

Worksheet for Assessing Facility-Use Suggested Donation

Sanctuary \$150/hr x _____ hrs \$ _____
(straight fee from set-up to clean-up)

Fellowship Hall \$75/hr x _____ hrs \$ _____

Kitchen \$75/hr x _____ hrs \$ _____

Chapel \$50/hr x _____ hrs \$ _____

TOTAL \$ _____

Non-refundable deposit - **\$100.00**

TOTAL \$ _____

Signature of SMLC Personnel _____

Date _____