



## Certificate of Insurance

All sports teams and catering companies must provide WCOTB a current certificate of insurance.

## Security Deposit

**A \$125.00 security deposit (cash or check) is required with the *Facilities Request Application*.**  
*(make the check payable to Wyomissing Church of the Brethren.)*

When the event has concluded, if the building is left as you found it, properly cleaned and there is no damage, your deposit will be returned.

### *Forfeit of your Security Deposit:*

1. **Event Cancellation:** a full refund will be given if cancellation notice is given to the office 2 weeks prior to the event. Failure to Notify the office of cancellation more 2 weeks prior to event forfeits the security deposit.
2. Failure to leave the church property cleaned, organized and returned to how you found it.
3. You are financially responsible for any damage of any kind to church property. Payment for any damages exceeding your security deposit will be required within 14 days after your event.
4. ***If our custodian needs to put away tables/chairs and equipment you have used***

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The person requesting the use of WCOTB Church facilities hereby absolves the church, its pastors, leadership, members, staff or people of any liability for personal injury to any individual resulting from the church of the church facilities and agrees to be responsible for any property damage that results during the use of the facilities. Please report any damage to the church office promptly.

The group or individual using the facility is responsible for set up, clean up.

\_\_\_\_\_  
Signature of Responsible Party

\_\_\_\_\_  
Date

## For Office Use only:

Security Deposit : Receipt of \$125.00 cash \_\_\_\_\_(initial) Date: \_\_\_\_\_

Receipt of \$125.00 Check # \_\_\_\_\_ (initial)

## Rental Agreement

Signatures on this form indicate the agreement of the renter to the terms and conditions, and the approval of the rental application by Wyomissing Church of the Brethren.

Facility Rental Donation to be paid in full by two weeks prior to event: \$ \_\_\_\_\_

Renters Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approval from \_\_\_\_\_ : \_\_\_\_\_ Date: \_\_\_\_\_