Request for Use of Urbana-Champaign Friends Meetinghouse
1904 East Main Street, Urbana, IL 61802

To request use of the meetinghouse for special events/classes/meetings, first check the availability of your desired date(s) with Sharon Haworth, Building Use Coordinator, 217-384-9591 or shaworth@sbcglobal.net. Then complete this form and return it to Sharon. She can help you if you have questions. If your request is approved, Sharon will contact you to make the necessary arrangements for your event. Thank you for your interest.

Today's date: _____ Your name:_____

Preferred method of contact: ❑Phone ❑E-mail Best time to reach you: _____

Please provide both, if available: phone:_____ email: _____

Are you a member/attender of Urbana-Champaign Friends Meeting? ❑Yes ❑No

Request is for: ❑One time only ❑Weekly ❑Monthly ❑Other (describe) _____

Date(s) requested for use: _____ Hours (from-to) _____

Space desired: ❑Meeting room ❑Commons Area

❑Kitchen (Kitchen not currently available for cooking)

Type of event: ❑Worship ❑Wedding ❑Lecture ❑Meeting ❑Class ❑Other _____

Purpose (if not worship or wedding):_____

_____

Estimated number of attendees: _____

Is the requesting party: ❑a not-for-profit entity? ❑a for-profit entity? ❑Other (please explain)_____

Name and address of above: _____

_____

Are you the person organizing the event/class/meeting? ❑Yes ❑No

If NO, please give name, address, and phone number of person in charge: _____

_____

How will this event be promoted? _____
(Please attach or forward a copy of any press release, flyer, program, brochure, sign or other notices.)

Will attendees be: ❑charged a fee or ❑asked to donate for the event? ❑YES (amount):_____ ❑NO

You will need to have liability insurance coverage that would apply during your use of the meetinghouse. Please describe this coverage below and plan to provide a certificate of insurance naming Urbana-Champaign Friends Meeting as a co-insured during the date(s) and hours of use. This can be obtained from your insurance agent and must be provided to _____ on or before the following date: _____.

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