

Central Moravian Church
73 W. Church Street, Bethlehem PA 18018-5821
Phone: 610-866-5661–Email: office@centralmoravianchurch.org

Application for Use of Central Moravian Church Facilities
(to be submitted not less than seven days prior to an event)

Contact Person:

Name _____
Organization _____
Address _____
Phone Number (cell phone preferred) _____
Email _____

1. Chapel (check area needed):

Upper Level _____ Lower Level _____

2. Christian Education building (check room(s) needed):

Nitschmann Hall _____ Kitchen _____
(Lower Level) (Lower Level)

Zinzendorf Parlor _____ Benigna Auditorium _____
(Lower Level) (Upper Level with stage)

Other classrooms: Basement _____ Main Floor _____ Second Floor _____

3. Sanctuary _____

Type of Activity _____

Date(s) of Activity _____

Time(s) of Activity _____

Time you wish facility to be opened/closed: _____
(Please be prompt, someone will be waiting for your arrival)

Number attending _____ Special Needs _____

Number of Tables _____ Chairs _____

Please make a sketch of room set-up on reverse side of sheet.

I understand that insurance liability will be the responsibility of the group using the facilities. Please submit a Certificate of Liability Insurance, naming Central Moravian Church as the additional insured, to the church office one month prior to your event.

Certificate of Liability Ins. Received _____

Indemnification Declaration _____

Signature of Requester _____

Approved by _____

Date _____

Date _____