

HCN FACILITY REQUEST



Thank you for wanting to partner with churches in Nebraska! To begin the reservation process, please complete this Facility Request Form for approval to utilize space at the HCN building for your mission team. Submission of this request does NOT guarantee facility usage. All requests will be reviewed and approved at the discretion of the Heartland Church Network. There is be multiple teams utilizing our facility throughout the year. **In order to accommodate each team, please accurately fill out the information below and return it to haley@heartlandchurchnetwork.org**

CONTACT INFORMATION

TODAY'S DATE _____ CHURCH / ASSOCIATION _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
CONTACT PERSON _____ TITLE _____
PHONE: CHURCH _____ CELL _____ ALTERNATE _____
BEST MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____
EMAIL _____ CHURCH/ASSOC. WEBSITE _____

IF APPROVED, HOW WOULD YOU LIKE TO RECEIVE ADDITIONAL INFORMATION ABOUT THIS TRIP? MAIL EMAIL

TEAM INFORMATION

DATE(S) REQUESTED _____
ESTIMATED ARRIVAL TIME _____ ESTIMATED DEPARTURE TIME _____
CONTACT PERSON ON-SITE _____ CELL _____
ESTIMATED GROUP SIZE : MALES _____ FEMALES _____
ESTIMATED # OF ADULTS _____ YOUTH (7-12 GRADE) _____ CHILDREN _____

MISSION WORK INFORMATION

NEBRASKA CHURCH YOU ARE PARTNERING WITH: _____
PLANNED ACTIVITIES FOR THE CHURCH YOU ARE SERVING: _____

BLOCK PARTY TRAILER RENTAL REQUESTS

WILL YOU NEED TO RESERVE THE BLOCK PARTY TRAILER? YES NO
WILL THE HOST CHURCH OR THE MISSION TEAM PAY FOR TRAILER RENATAL?: _____
(The date requested for the block party trailer is not guaranteed until the HCN office confirms your reservation. The trailer can be reserved for a maximum of 2 days at a time. Rental Fee: 1st day \$75 - 2nd day \$25 additional fee.)
BEGINNING DAY AND TIME _____
ENDING DAY AND TIME _____

All Teams must submit insurance certification in which the Team assumes primary responsibility for injury or property damage by all persons who are on the HCN property as part of that Team's activities. **Please provide a certificate of insurance naming Heartland Church Network as additional insured for the duration of the team's stay.**

BUILDING USAGE AGREEMENT

We consider it a part of our support of churches and church planters for Teams to use our building! We pray that you enjoy your time of service in our area and that God is glorified through your service.

Please Initial Each Item Below

____ Each team must provide adult supervision at all times for youth and children.

____ The Team must **PROVIDE PROOF OF GENERAL LIABILITY INSURANCE** with limits not less than \$1,000,000 for General Usage and \$3,000,000 for Aggregate. The Heartland Church Network needs to be named as an additional insured on your policy in connection with the usage of our facility.

____ Have your insurance company fax certificate of additional insured to 402-551-1376 or e-mail it to haley@heartlandchurchnetwork.org

____ Show respect for the facilities and other teams that might be sharing the facility with you.

____ A \$250 deposit is required. A refund will be issued if no building damage is done and the building is left clean.

SIGNATURE

Contact Info • PO BOX 6157, 2100 S. 51st Street • Omaha, NE 68106 • O: 402-551-0608 • F: 402-551-1376 •

For office use only: Approved Signature _____ Date _____