



ST. SAVA SERBIAN ORTHODOX CHURCH OF BOSTON

41 Alewife Brook Parkway • Cambridge, MA 02140 • 617-674-4035 • www.stsavaboston.org

APPLICATION FOR HALL RENTAL

IMPORTANT: Please complete all information and return promptly. The rental date will not be guaranteed without a completed agreement and appropriate deposits. Applications are subject to the approval of the church board and will be reviewed within two weeks of the application date¹.

Function Date _____ Requested Hours (Тражено време) _____ to _____

Day of Week (Circle One) Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Intended Use _____ Approximate Attendance _____
(Сврха изнајмљивања) (Број гостију)

Name of Organization or Individual _____
(Име организације или појединца)

Address _____ Email _____
(Адреса)

Home Telephone () - _____ Business Telephone () - _____ Fax () - _____
(Кућни телефон) (Пословни телефон) (Број факса)

Name of Person Responsible for the Event (same as above) _____
(Име особе или организације одговорне за догађај ако то није особа која подноси захтев)

Address _____ Email _____
(Адреса)

Home Telephone () - _____ Business Telephone () - _____ Fax () - _____
(Кућни телефон) (Пословни телефон) (Број факса)

Do you desire use of kitchen Yes No (please read the rental policy guidelines with regards to the kitchen)
(Да ли желите да користите кухињу)

Name of Caterer (if applicable) _____
(Име снабдевача хране)

Address _____ Telephone () - _____
(Адреса) (Телефон)

¹ The application date refers to the date the application is received by mailed or otherwise provided by the applicant.



I have completed this application/agreement and have read, understood, and agree to the rental policy which is incorporated herein by reference.

Applicant Signature (Потпис) _____

Date (Датум) _____

Church Board Use Only

Application Received (Date) _____

	AMOUNT	AMOUNT RECEIVED	CHECK #	DATE PAID
Amount Received for Rental				
Amount Received for Security Deposit				
Additional Costs				
Amount and Date of Security Deposit Return				

Insurance Information Received _____
Date

Approved by the Church Board _____
Date

Refreshment Bar _____

Police Detail _____

Liquor License _____

Copy given to Custodian _____

Additional Notes _____
