

**Kentucky Christian Assembly, Inc.**  
**PO Box 71, 544 Grassy Branch Road**  
**Brodhead, KY 40409-0071**  
**(606) 758-8811**

## **Facility Rental Agreement**

Name of Group \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Cell phone \_\_\_\_\_

E-mail address \_\_\_\_\_

Date of event \_\_\_\_\_ Expected attendance \_\_\_\_\_

Start time \_\_\_\_\_ Ending time \_\_\_\_\_

Description of event \_\_\_\_\_

\_\_\_\_\_

Facilities to be used

Coleson Hall and Kitchen \_\_\_\_\_ Campfire Area \_\_\_\_\_

Volleyball Court \_\_\_\_\_ Basketball Court \_\_\_\_\_

Additional Shelters \_\_\_\_\_ Baldwin Trail \_\_\_\_\_

Groups should bring their own sporting equipment.

Dorms are available for overnight stays at an additional cost.

**KCA Rental Fee is \$125.00 per day. A \$50 deposit will hold the facilities for a specific date. Payment of \$125.00 is due prior to the event. Checks should be made payable to Kentucky Christian Assembly.**

I/We understand and agree to the following:

1. KCA exists to glorify Jesus Christ and further His work on this earth. All groups must act in a manner that is consistent with Christian principles at all times. There will be absolutely **NO** alcohol, drugs lewd or illegal activity. KCA reserves the right to ask any group engaged in any of the above to leave the premises immediately.

2. KCA equipment and facilities will be respected by all members of the group. I accept full responsibility for broken, damaged or missing items and agree to pay for any such items.

3. Tobacco will not be used in KCA buildings.

4. Pets are not allowed.

5. Groups are expected to clean up buildings and grounds following events. Trash cans should be emptied into the dumpster provided. Kitchen should be cleaned, if used. Groups who do not clean up the grounds will be charged and additional \$100 to clean up.

6. KCA, Inc. is **NOT** responsible for accidents or injuries sustained by members of your group while renting the camp. Individuals should be covered by either your group's insurance or an individual's personal coverage.

I have read the entire agreement and agree to the terms listed. I understand that I will be responsible for the conduct and actions of my group.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Group I am responsible for \_\_\_\_\_

Any additional comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please mail this form to KCA, Inc., PO Box 71, Brodhead, KY 40409