



First Baptist Church Anacortes
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FACILITY CLEAN-UP/CHECK-OUT AGREEMENT

Form with fields for Date(s) of Function, Start Time, Ending Time, Purpose or Nature of Event, User/Organization Name, Phone, Address, Email, Representative/Contact Person, Business Phone, Cell Phone, Expected Attendance, Will Food be Served?, and If YES - By Whom.

USER RESPONSIBILITIES - CLEAN-UP

GENERAL CLEANLINESS:

- List of 7 bullet points detailing cleanliness requirements such as removing items, turning off stoves, cleaning countertops, removing decorations, emptying coffee pots, washing service ware, and placing garbage in the dumpster.

The undersigned hereby agrees to the above conditions of clean-up.

User/Organization Name: _____

User/Designated Responsible Party

Date

SEE FOLLOWING PAGE FOR CHECK-OUT SIGN-OFF

USER RESPONSIBILITIES – CHECK-OUT

It is the responsibility of the User, or their designated responsible party, to see that the facility is left in the same condition as it was received prior to their reserved time. The following items must be checked off upon completion of the User’s event. The User and/or the responsible party, and the First Baptist Church Anacortes (“FBC”) Facility Representative on duty, shall sign this Facility Clean-Up/Check-Out Agreement at the conclusion of the event prior to exiting the facility. Any damage or area not cleaned appropriately may result in all or part of the deposit being withheld, and additional charges may be billed if deposit does not cover costs to return facility to its prior condition.

GENERAL CLEANLINESS:

- All items, food, decorations, etc. brought into the facility for an event were removed
- All stovetops, ovens, fans, lights were off
- All countertops, sinks, and stove tops were cleaned
- All decorations in and out were removed
- Coffee pots were emptied and cleaned
- All service ware, silver, glassware, pots and pans were washed and returned to the proper storage area.
- All garbage was placed in the dumpster outside the facility.

OTHER:

- Did the User Group use any non-reserved resources, equipment or space? If so, please list:
 - _____
 - _____

RESERVED CHECK-OUT TIME: _____ ACTUAL TIME _____

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FBC Facility Representative:

Comments or noted damage: _____

Photos of damage attached: YES NO

Facility Representative Signature _____ Date: _____

User/Responsible Party:

Comments:

User/Responsible Party Signature: _____ Date: _____