

**NON-CALIMESA CHURCH MEMBER
WEDDING FEES**

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|--------------------------------|------------------|-------|
| SANCTUARY ONLY | \$ 650.00 | _____ |
| WEDDING & RECEPTION | \$ 800.00 | _____ |
| CHRISTMAS WEDDING (additional) | \$ 200.00 | _____ |
| GARDEN CHAPEL ONLY | \$ 375.00 | _____ |
| PATIO ONLY | \$ 200.00 | _____ |
| REHEARSAL DINNER | \$50.00 | _____ |
| FELLOWSHIP HALL ONLY | \$ 375.00 | _____ |
| FIRESIDE ROOM ONLY | \$ 275.00 | _____ |
| EXTRA PREPARATION ROOMS | \$15.00 each | _____ |
| CLEANING FEE (before wedding) | \$25.00 /hr | _____ |
| MANDATORY DEPOSIT | \$ 300.00 | _____ |
| CANDLES 8" | \$0.35 each | _____ |
| 15" | \$0.40 each | _____ |
| CLEANING FEE- (Runner) | \$50.00 | _____ |
| TOTAL FEES | | _____ |

LIABILITY CLAUSE

As a material part of the consideration to be rendered to the Calimesa Seventh-day Adventist Church (Lessor), we waive all claims against Lessor and we waive all claims against Southeastern California Conference of Seventh-day Adventists (Property Owner), for injuries to persons in, upon, and about the leased premises, arising at any time or in any manner from the use or occupancy of said premises by us, (including but not limited to members of the wedding party, their families and guests, performers, technicians, and others), from any cause whatsoever (except from the negligence or unlawful acts of Lessor or Property Owner), and we will hold Lessor and Property Owner exempt and harmless from any such liability, loss, cost, and obligation on account of any damage or injury to any person or to the goods, wares and merchandise of any person.

I have read the policy and liability clause of the Calimesa Seventh-day Adventist Church and agree to abide by the Guidelines as presented. I am enclosing my deposit of \$300.00 to reserve the date of _____. I understand the remaining fee of _____ is due by _____.

Signature of Bride: _____ Date: _____

Signature of Groom: _____ Date: _____

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(For Church Office Use)

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|---|-------------|
| CHURCH HOSTESS _____ | Phone _____ |
| Deposit Received \$ _____ | Date _____ |
| Rental Fees \$ _____ | Date _____ |
| Candle Fees \$ _____ | Date _____ |
| Cleaning- Runner \$ _____ | Date _____ |
| Deposit (Full Refund) \$ _____ | Date _____ |
| Deposit (Partial) \$ _____ | Date _____ |

Signed _____ Date _____

Reasons for partial refund: _____
