

# Calvary Church Home Base Application

Date \_\_\_\_\_

Rent for Home Base is \$650/month for Calvary Church Impact Partners. Rent is \$1,000/month for non-Calvary Church Impact Partners. Rent is due no later than the first day of the month. Checks are made to "Calvary Church." Maximum length of stay is one (1) year. Minimum length of stay is three (3) months. (Other requests subject to Calvary's career mission team discretion.) Rental rate subject to change.

## CONTACT INFO

Name(s) \_\_\_\_\_ Phone (Cell) \_\_\_\_\_

Field Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email \_\_\_\_\_

## FAMILY INFO

Number in Family \_\_\_\_\_

Names and ages of your children that will be staying at Home Base with you.

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Requested Home Base Stay \_\_\_\_\_

Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

Reason for Request

Home assignment  Other (explain briefly) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## YOUR ORGANIZATION

Non-profit/mission organization \_\_\_\_\_

Address \_\_\_\_\_ Phone (Office) \_\_\_\_\_

\_\_\_\_\_  
Phone (Fax) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Email \_\_\_\_\_ Contact \_\_\_\_\_

## AGREEMENT OF HOME BASE TERMS

I have read the Home Base Expectations and agree to follow them if granted permission to occupy the home. Once approved, a \$300 refundable deposit and contract are due to officially reserve your spot.

**NAME** \_\_\_\_\_  
(Please Print)

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

### MAIL OR RETURN APPLICATION TO:

Calvary Church  
Attn: Bonnie Johnson  
2120 Lexington Ave N  
Roseville, MN 55113

### OR EMAIL APPLICATION TO:

bonnie.johnson@calvarychurch.us  
(Re-save pdf with your name.)

#### ***Impact Committee Use Only***

Application Received \_\_\_\_\_ Approved \_\_\_\_\_ Pending \_\_\_\_\_

Follow up Needed \_\_\_\_\_ Contract Sent \_\_\_\_\_ Deposit Received \_\_\_\_\_

Contract Received \_\_\_\_\_ Family Notified \_\_\_\_\_

Signed by (Names) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_