

Facility Use Request Form

Please return completed form to the church office at least 30 days prior of your request in order to confirm your reservation.

1. Requestor Name: _____ Date: _____

2. Address: _____ Phone: _____

3. Date(s) Requested: _____ If recurring – Start date _____ End date: _____

4. Time of day: Begin: _____ End: _____

5. Member or regular attendees who will be present: _____

6. I have access to the building (key). I will need access to the building.

7. *Facilities needed (please check all rooms you intend to use):

- | | |
|--|--|
| <input type="checkbox"/> Fellowship Hall | <input type="checkbox"/> Classroom(s). How many? _____ |
| <input type="checkbox"/> Sanctuary | <input type="checkbox"/> Conference Room |
| <input type="checkbox"/> Kitchen | <input type="checkbox"/> Other |

8. *Equipment Needed:

- | | | |
|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> TV/VCR/DVD | <input type="checkbox"/> Boombox | <input type="checkbox"/> Overhead Projector |
| <input type="checkbox"/> Power Point | <input type="checkbox"/> Sound System | <input type="checkbox"/> Coffee Pot(s) |

Use Guidelines. Signature of this form indicates acceptance of all applicable fees and guidelines.

Briefly describe the activity to be held: _____

Estimated number of people in attendance: _____

The person/organization requesting the use of Church facilities hereby absolves the church, its pastor, leadership, members, or people of any liability for personal injury to any individual resulting from its use of the church facilities and agrees to be responsible for any property damage that results during the use of the facilities. Please report any damage to church office promptly.

The group or individual using the facility is responsible for set up, clean up, and return to normal set up of the facility.

Signature of Responsible Party

Date

FOR OFFICE USE ONLY:

Approved by: _____ **Date:** _____

Pastor Signature: _____ **Date:** _____