

Facility Use Request

Date of Request_____

Proposed Activity_____

Date and Time of Event_____

Desired Date(s) of Use_____

Desired Times of Use_____

Group or Individual Requesting Use_____

Physical Address_____

Phone number_____

Requesting Person_____

Phone number_____

Address_____

Email_____

Facilities Requested_____

- Sanctuary, foyer, 2 front prayer rooms, restrooms
- Sanctuary piano and organ
- Fellowship hall—dining area and kitchen, appliances, hall restrooms
- Fellowship hall piano
- Nursery
- Outdoor Pavilion

Number of 8 ft. folding tables needed_____

Number of folding chairs needed_____

Approved by_____

Date approved_____

Key(s) given to_____