



## Facility Use Request

Name of Group or Event \_\_\_\_\_

Date(s) requested \_\_\_\_\_

### DESCRIPTION OF YOUR EVENT

Estimated Attendance \_\_\_\_\_

Set up time \_\_\_\_\_

Beginning time \_\_\_\_\_

Ending time (including clean up) \_\_\_\_\_

### AREAS REQUESTED (check all that apply)

- ☐ Fellowship Hall
- ☐ Parlor
- ☐ Lower Level Rooms
- ☐ Sanctuary

### PRIMARY CONTACT PERSON (designated liaison)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Special Needs: (Setup, audio, lighting, etc.) May use back of form to draw desired set up.

---

---

---

I have read the facility use policies and I agree to the stated terms, conditions, and policies.

Signature \_\_\_\_\_ Date \_\_\_\_\_