

Coquitlam Christian Centre

2665 Runnel Drive, Coquitlam, BC V3E 1S3, 604-944-9990, Fax: 604-944-0728, email: ccc.office@shaw.ca

ROOM USE AGREEMENT

Please Complete Entire Form

Event Name and Description _____

Name of Organization _____

Organization's Purpose: _____

Organization Day Phone: _____ **E-mail** _____

Sponsored by: (Ministry/Department/Individual) _____

Address: _____

Contact Person:

Name: _____

Email: _____ **Phone Number:** _____

Date(s) Requested _____

Set Up Time _____ **Start Time** _____

End Time _____ **Clean Up Time:** _____

(Dates may not be scheduled more than nine months in advance, except with specific permission.)

Will the event be recurring _____

One time only Monthly Weekly Multiple days

Which day of the week

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Room(s) Requested:

Sanctuary

Chapel

Fellowship Hall/Kitchen

Youth Room

Committee Meeting Room

Nursery (available only by special arrangement with the Church Administrator)

Other: _____

Anticipated Number of Participants: _____

Will a participant fee be charged? Yes No

Will food or drink be consumed? Yes No

Special Needs or Requests: Please list equipment, tables, chairs etc. that you will need.

