

Today's Date _____

SHBC Facility Use Request

General Details

Event Title _____ (example: Rob's Party)

Event Type _____ (birthday party, family reunion)

Are you a member of South Hills Baptist Church? Yes _____ No _____

Is this a church event that can be publicly promoted? Yes _____ No _____

Name of Event Coordinator _____

Contact Info – Best Phone _____ Email _____

Backup/Alternate/Co- Coordinator Name _____

Backup Contact Phone _____ Email _____

Anticipated number of participants (range of +/- 10 is ok) _____

Will you be using decorations of any kind? Yes _____ No _____

If so, please describe _____

Event Date/Time

Event Date _____ Is this date flexible? Yes _____ No _____

Arrival Time _____ (when you want building/room access)

Setup Complete Time _____ (when you need our setup to be finished)

Start Time of Event _____ (when you are telling people the event starts)

End Time of Event _____ (when the room can start being reset)

End Time of Clean-Up _____ (when we can lock the building)

Is the timing for this event flexible? Yes _____ No _____

Event Location

Classroom (max 20 people) _____

Gym/Fellowship Hall

Choir Room (max 40 people) _____

Half Room Only _____

The Loft (max 60 people) _____

Entire Room _____

Number of Tables

Presentation/Serving Only _____ With Chairs _____

Card Table _____ seats 4 _____

Rectangle (6-ft) _____ seats 6 _____

Rectangle (8-ft) _____ seats 8 _____

Circle (8-ft) (max 6) _____ seats 8 _____

Number of Chairs

Without Tables _____

Padded _____

Metal _____

Special

High Chairs (as available) _____

Please describe the preferred arrangement (tables, chairs, etc.) for this event or provide a drawing of the desired setup on a separate page.

Note: We will do our best to accommodate your setup preferences, but our Facilities Assistant has the authority to deny any setup deemed unsafe, outside acceptable church practices, and anything not previously approved by the church office.

Other Needs (as available)

Kitchen* _____	<u>Platform/Stage**</u>
Playground _____	-Piano _____
TV/DVD/BluRay _____	-Choir Mics _____
Portable CD Player _____	-Pulpit _____
<u>A/V & Projection System (Gym)</u>	-Table _____
-Microphone(s) ____ (# - ____)	-Other _____
-CD/DVD Player _____	<u>Recreation Equipment</u>
-Smart Device Plug-In _____	-Balls (kind) _____
-Computer/Projection _____	-B-ball Court (½ or full) _____
-A/V Technician _____	-Volleyball _____
-Other _____	-Other _____

Are there other requests for this event concerning SHBC facility, equipment or personnel?

**Includes \$50 fee. Anyone using the kitchen must read and sign a copy of the Kitchen Use Policy.*

***If you wish to make any changes to the arrangement of the chairs, mics, or music stands on the platform, please email the Worship Pastor ahead of time for approval - aaron@southhillsbc.org.*

FOR OFFICE USE ONLY			
Deposit Amt.: \$_____	Facility Fee: \$_____	Paid? _____	Date: _____
Deposit Returned to Event Coordinator? Y_____ N_____		Date: _____	
If no, reason? _____		(attach documentation)	