

**First Presbyterian Church**  
**600 West Main Street**  
**Morristown, Tennessee 37814**  
**423-586-4281**

**FACILITY USE REQUEST FORM**

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

Address: \_\_\_\_\_

Tax-exempt organization? (Circle) Yes / No      Please include a copy of your Driver's license.

Name and address of contact person: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Rooms requested: \_\_\_\_\_  
 \_\_\_\_\_

Date and time of event: \_\_\_\_\_ Length of time: \_\_\_\_\_

Description of event: \_\_\_\_\_

Will a fee be charged to participants? \_\_\_\_\_ If yes, how much? \_\_\_\_\_

**Equipment needed:**

Fixtures	<i>Quantity</i>	Microphones	<i>Quantity</i>	Electronics	<i>Quantity</i>
Stage (8' x 4') (1)		Wired Microphone (4)			
Tables (6ft rectangle - seats 8) (43)		Wireless Microphone (Lapel) (2)		Projector (Large) (1)	
Tables (6ft round - seats 10) (45)		Wireless Microphone (Handheld) (1)		Projector (Small) (1)	
Chairs (440)				Mixer Board (1)	
Tablecloths (45) (\$12/cloth)					

Number of expected participants: \_\_\_\_\_ Adult, children (ages)? \_\_\_\_\_

Childcare/Nursery Requested (Circle) Yes / No      If yes, expected number of children \_\_\_\_\_

Do you have liability insurance? \_\_\_\_\_ Coverage limits? \_\_\_\_\_

By submitting this application, the undersigned represents that the information provided is true and accurate. If the request is granted, the person/organization will be responsible for any damage to the premises of First Presbyterian Church. Changes to equipment needs must be made thirty (30) days in advance of the event in order to avoid being invoiced for initial equipment requests. I have read and agree to abide by the policies contained in the First Presbyterian Facility Usage Policy, including the schedule of fees.

Agreed this the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Applicant Signature

**FOR OFFICE USE ONLY:**

Approved: \_\_\_\_\_ Fee Estimate: \_\_\_\_\_ Host: \_\_\_\_\_ Set-up/Take-down/Clean-up: \_\_\_\_\_