

# Request to Use Church Facilities

Name of responsible member: \_\_\_\_\_ Phone number: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Type of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Time of Event (include set-up/clean-up time): Start \_\_\_\_\_ End \_\_\_\_\_

Desired Facility (Please circle): Gym Café Parlor Conference Rooms Fellowship Hall Classroom Worship Center

Furnishings: # of Round Tables \_\_\_\_\_ # of Rectangular Tables \_\_\_\_\_ # of Folding Chairs \_\_\_\_\_  
 Gym equipment: 10' basketball goal \_\_\_\_\_ 8' basketball goal \_\_\_\_\_ Volleyball: \_\_\_\_\_

**Fees: (Requester initials by your selection)**

**Church Related Events:** includes Sunday School class fellowships, and teas and showers sponsored by and given for church or Sunday school members:

\_\_\_\_\_ Option A: A church member will set up, clean up, bag trash and take it to the dumpster, replace furnishings to original configuration, turn off lights and lock doors: **No charge**

\_\_\_\_\_ Option B: Custodian will set up, clean up, replace furnishings, and lock up:  
 Gym or gym and café: \$100 \_\_\_\_\_  
 Café, parlor, conference room, fellowship hall, classrooms: \$50 \_\_\_\_\_  
 Worship center: \$75 \_\_\_\_\_  
 Audio-visual tech: \$50 \_\_\_\_\_

**Personal Events:** includes birthday parties, anniversary celebrations, family dinners, reunions, and club meetings:

\_\_\_\_\_ Option A: A church member will set up, clean up, bag trash and take it to the dumpster, replace furnishings to original configuration, turn off lights and lock doors:  
 Gym or gym and café: \$50 \_\_\_\_\_  
 Café, parlor, conference room, fellowship hall, classrooms: \$25 \_\_\_\_\_  
 Worship center: \$50 \_\_\_\_\_  
 Audio-visual tech: \$50 \_\_\_\_\_

\_\_\_\_\_ Option B: Custodian will set up, clean up, replace furnishings, and lock up:  
 Gym or gym and café: \$100 \_\_\_\_\_  
 Café, parlor, conference room, fellowship hall, classrooms: \$50 \_\_\_\_\_  
 Worship center: \$75 \_\_\_\_\_  
 Audio-visual tech: \$50 \_\_\_\_\_

TOTAL DUE: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Signature of person making request: \_\_\_\_\_

**FOR OFFICE USE ONLY**

APPROVED: _____ DATE APPROVED: _____ Copied and given to custodian(s): _____ Copied and given to recreation director: _____ Contacted requester of approval: _____
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