



Second Missionary Baptist Church
818 North Apperson Way – Kokomo, Indiana 46901

Ministry Space Reservation Form

(For committee/ministry meetings and activities space use. Ministries of SMBC will not need to use any other Facility Usage form.)

Date of Request _____

Person submitting request _____

Committee/Ministry _____

Name of Event/ Activity _____

We are requesting a:

One time meeting/activity on _____ (date) at _____ (start and end time)

Repeating or Reoccurring meetings/activities to be held on the: *(note that this form must be updated annually)*

Circle one for the week: 1st 2nd 3rd 4th

Circle one for the day:

 Sunday Monday Tuesday Wednesday Thursday Friday Saturday

Beginning on _____ (date) through _____ (date)

State and end time _____

Which facility? Circle one: Worship Center Activity Center

Room/Space Requested _____

Please detail any special request for room setup on the back of this form.

Contact Person's Name _____

Phone Number _____

Email Address _____

In the event of cancellation, please notify the church office immediately and your ministry.

For Office use only:

Entered into calendar

Actual room assigned

Janitor notified

Included in church bulletin

*****Please return this form to the church office*****