

# First Reformed Church

## Use of Facilities Request

Date \_\_\_\_\_

Name \_\_\_\_\_ (member/ non-member)

Name \_\_\_\_\_ (member/ non-member)

Requests the use of:

Sanctuary  Wezeman Hall  Activity Center  Kitchen  Nursery  \_\_\_\_\_

Event Day: SU MO TU WE TH FR SA Date: \_\_\_\_\_ Time: \_\_\_\_\_ am/pm

for the purpose of \_\_\_\_\_

# of Guests: 50 or less 50-100 100-150 150-200 200-250 250-300 300 or more \_\_\_\_\_

Primary contact person & address: \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Clean-up person/crew \_\_\_\_\_

Responsible for own set up? Yes  No  and clean up? Yes  No  Need help? Yes  No

Set up time \_\_\_\_\_ Close up time \_\_\_\_\_

Access in \_\_\_\_\_ Lock up \_\_\_\_\_

Special Equipment Needed/Special Instructions:

Room Set-up (Include Diagram, if known):

### For Office Use Only:

Informed Party \_\_\_\_\_ Approved \_\_\_\_\_

Church Calendars: Master  Custodial  On-line  Bulletin  Wall (if applicable)

Custodian/Security \_\_\_\_\_ Pd.  Video Operator \_\_\_\_\_ Pd.

Sound Room Operator \_\_\_\_\_ Pd.  Facility Cost (if any) \_\_\_\_\_ Pd.

Kitchen Coordinator \_\_\_\_\_ Pd.  Service Master Notified \_\_\_\_\_