

# Center for Hope Ministries

## Facility Request Form

In order to reserve use of the facility please fill out the information below. Your request will be processed and confirmed within one week. However please note this does not guarantee approval.

Today's Date: \_\_\_\_\_

|                                     |                      |              |
|-------------------------------------|----------------------|--------------|
| Name of Auxiliary / Ministry: _____ | Leader: _____        |              |
| Contact Person: _____               | Contact Phone: _____ | Email: _____ |

Circle Day of Week Requested:      SUN      M      T      W      TR      FR      SA

Name of Event \_\_\_\_\_ Date of event/meeting: \_\_\_\_\_

Start time of Event: \_\_\_\_\_ End time of Event: \_\_\_\_\_

What time will you need the doors opened? \_\_\_\_\_ Expected attendance: \_\_\_\_\_

### Room(s) needed for your event:

Sanctuary      Fellowship Hall      Nursery      Classroom 1- 2 /Both      Library

Kitchen \*kitchen use **for Authorized use ONLY!**

Kitchen \*Hospitality service needed! (**Please note:** You MUST see Hospitality Director prior to event)

### Equipment needed:

Podium w/ microphone      Microphone w/stand \_\_\_\_\_      Instruments

Sound System \* **Authorized use ONLY!**      Other \_\_\_\_\_

Church Vehicles (Please submit a Vehicle Request Form)

I, \_\_\_\_\_, will be responsible for the use and care of the facility. I will check in and out of the facility with designated Deacon/Security. I will be responsible for: (1) leaving the room(s) in order; (2) disposing of trash; (3) if kitchen is used, it shall be cleaned; (4) if supplies are used, they shall be put back in their designated storage areas. **DO NOT SIGN BELOW, UNTIL YOU READ THE ABOVE STATEMENT.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## For Office Use Only

Date Received: \_\_\_\_\_

Approved: \_\_\_Yes \_\_\_No

Reason Denied: \_\_\_\_\_

Modifications & Comments: \_\_\_\_\_

Copies Forwarded to: \_\_\_Deacons      \_\_\_Security      \_\_\_Other

Signature: \_\_\_\_\_

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