



St. Mark's United Methodist Church
Church Facilities Use Request

- Received by Admin
Approved by AdBoard
Copy to Maintenance
Copy to Tech Support

INSTRUCTIONS: The form may be filled in online or printed and filled out as a hard copy. Type or write in blanks; click on (X) or mark boxes for "Yes" and "No" answers. Submit online forms to the office manager at kathleen@umcstmarks.org. Hard-copy forms may be dropped off at the church office. Direct questions to the office manager at kathleen@umcstmarks.org.

Form Submission Date: _____

Event Background: Event Name: _____

Date(s): _____

Name of organization/group: _____

Contact person/phone number/email: _____

Is this a church function? Yes No

How many people, including guests, volunteers, performers, etc., are expected? _____

Pre-Event Setup Start Time: _____ Event Start Time _____

Event End Time: _____ Post-Event Cleanup End Time: _____

Church Facilities Requested: List the church facility(ies) requested in the space provided below.

Key to requested facilities needed? Yes No If yes, issue to: _____

Note: If the kitchen is requested, provide the name of the individual trained in kitchen use who will supervise use of the kitchen: _____

Furniture/Equipment Required? Yes No (Provide a single value for each item)

Number: Round Tables _____ Rectangular Tables _____ Chairs _____ Podiums (up to 2) _____

Sound/Audio Visual (S/AV) Equipment* Yes No Technician needed? Yes No

*Provide an explanation if needed: _____

Whiteboard Yes No Other equipment requested: _____

Nursery/Child Care Desired? Yes No

Contact the Children and Family Ministries Coordinator at julie@umcstmarks.org to determine the availability of nursery/child care. Generally, at least two weeks' notice is required. Have the following information available:

Number of children expected _____ Age range _____

Hours child care will be needed _____ Start Time: _____ End Time: _____

Child care is provided at church-related functions at no charge. A fee applies for nonchurch-related functions.

Declaration: On behalf of the above-named organization/group, I agree to, and will ensure compliance with, the terms of this request and St. Mark's UMC "Policy for Use of Church Facilities."

Printed name _____ Signature _____



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OTHER INFORMATION

Provide a written description or sketch of the room setup (please be specific).

Five horizontal lines for providing a written description or sketch of the room setup.

Notes:

Five horizontal lines for notes.

PLEASE NOTE: Groups shall return the room to its original set up unless otherwise instructed by the Maintenance worker(s), Facilities Coordinator, Office Manager, or Pastor. This includes returning any items that have been removed from and/or removing items added to the room. The group leader shall turn off all lights, return heating/cooling to its original setting, and lock all doors.

OFFICE USE ONLY BELOW THIS LINE

Date(s) available? []Yes []No Charge for use? []Yes []No

Amount due: _____ Paid? []Yes []No

Key checked out? []Yes []No Key returned? []Yes []No