

FORMS: Facility Use Request Form (COVID)

Faith United Methodist Church Facility Use Request Form for Church Ministries and Sponsored Groups (Rev. 8.2021)

Committee/Ministry:		Reque	Requested By:	
Reason for Use:		Phone.	Cell:	
		Email:		
Date(:	s) Requested:			
Time:	Setup: Ev	ent Time:	Vacated By:	
	*Events or large gatherings outside the scope of the ministry/groups usu		usual practices/meetings require pastoral app	roval
	Rooms Requested:			
	Sanctuary	Activity Room	Room 18	
	Kitchen*	Fellowship Hall	Room 19	
	Downstairs Chen	Patio	Room 20	
		Room 16	Room 22	
		Room 17	Room 23	
	AV**: No Specify equip. requested:			
	Need assistance to setup/run:	Yes No		
	Regular use at each meeting:	Yes No		
	One time use only:Yes	No		
	Special Equipment (Specify):			
FOR	OFFICE USE:			
1.	Office Calendar Approval	Ву:	Date:	
2.	Pastoral Approval	Ву:	Date:	
3.	Approval sent to Ministry Leader	Ву:	Date:	
4.	Kitchen Use Information Form forwarded to ministry group		pN/AYes Date:	
5.	AV Request Form received Da	te: To AV	(date):	
6.	. Closing checklist to Ministry Leader By:		Date:	