

ROOM REQUEST FORM

When your ministry requires a room(s) please confirm with the Church Office Staff for calendar availability then use this form to indicate the room(s) needed, the date, time and number of people expected. A Facility Use Checklist should be obtained along with this form.



<u>DATE</u>	<u>TIME</u>	<u>ROOM(S)</u>	<u>CONTACT PERSON / PHONE#</u>

PLEASE INDICATE ANY SPECIAL EQUIPMENT AND SETUP NEEDS BELOW.
A DIAGRAM FOR ROOM ARRANGEMENT IS PREFERRED.

No Changes Necessary Overhead Projector/Screen Podium TV/DVD/VCR

Tables: Round (60") # _____ Banquet (30"x60") # _____ Seminar (18"x60") # _____

**ROOMS
(Circle):**

- 101-102
- 103-104
- 105
- 106-107
- 108-109
- 111TR
- 201
- 203K
- 224
- 225
- 226-227
- Aud
- FAC 204
- FAC 205
- FC
- Gym
- Kit
- Lib
- Nurs
- Crwl
- Tddl
- Port A
- Port B
- Port C
- Port D
- Pry Rm