



GUIDELINES FOR USE OF CHURCH FACILITIES
Grace Community Church Building Use/Room Request Form

Please fill the form out completely and accurately. The more information we have the better we can serve you. This request will be used to help us in scheduling room usage. **Requests will not be approved beyond 6 months from date of request.**

Name of Event: _____ **Group Requesting:** _____

Room Requesting: _____ **Estimated # of Attendees:** _____

Start Date: _____ **End Date:** _____

Start Time: _____ **End Time:** _____

Ongoing classes may be requested to make exceptions throughout the year for church wide events that require additional building space (e.g., VBS).

Number of Tables Needed: _____ **Number of Chairs Needed:** _____

Sponsoring class will be responsible for setup and returning class to the standard configuration.

Audio/Visual Needs:

Contact Information

Name: _____ **Email:** _____

Daytime Phone #: _____ **Evening Phone #:** _____

This event is part of one of the following Ministry Areas: (Please mark accordingly)

_____ **Adult**

_____ **Youth**

_____ **Children's**

_____ **Mission**

_____ **Caring**

_____ **Worship/Music**

_____ **Welcome**

_____ **Other**

Please specify: _____

_____ **Community Group**

Please specify: _____

_____ **Not directly related to the Church (explain):** _____

Once your request is received it will be compared against the church master calendar. The contact person will receive a confirmation email along with your room assignment at which time you will know that your request has been approved. Keep in mind, there may be a fee or deposit required for use of our facilities.

Signature: _____ **Date:** _____

By signing this form, I/we are aware that our event may be cancelled due to emerging church related events (e.g., funerals, severe weather, catastrophic event, etc.).