

Room/Facility Use Reservation Non-Ministry Related Event - Form #2

Facilities Team and Church Office must approve all usage requests.

Section 1: Event Information

Event Name: _____

Description: _____

Anticipated attendance: _____

Responsible person for event (must be Bethany attendee) : _____

Responsible person's phone number: _____

Date of event: _____ Time of event: _____

Time room is needed for setup: _____ Time Cleanup will be completed: _____

One-time event: _____ Ongoing: _____ (If ongoing, please circle day of the week: M T W T H F S S)

Ongoing event: Starting date ___/___/___ Ending date ___/___/___ Frequency _____

Section 2: Event Resources Needed

Please check all requested rooms (Building maps and usage fees required are available upon request.):

- | | |
|---|--|
| <input type="checkbox"/> Atrium | <input type="checkbox"/> Friendship Room |
| <input type="checkbox"/> Ball Diamond | <input type="checkbox"/> Gym |
| <input type="checkbox"/> Fellowship Hall | <input type="checkbox"/> Educational Area, Classroom # _____ |
| <input type="checkbox"/> Fireside Room | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Kitchen (by gym) | <input type="checkbox"/> Kitchen (by office) <input type="checkbox"/> Kitchen (by fellowship hall) |

If you need tables/chairs available for this event, how many of each? Tables Chairs

(Room set-up & clean-up will be the responsibility of the person reserving the area.)

Check any additional items needed:

- | | | | |
|--|---------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Digital Projector | <input type="checkbox"/> Sound System | <input type="checkbox"/> Athletic Equipment | <input type="checkbox"/> Podium |
| <input type="checkbox"/> Chalk Board | <input type="checkbox"/> Whiteboard | <input type="checkbox"/> Punch Bowl | <input type="checkbox"/> Coffee Maker |
| <input type="checkbox"/> TV & VCR/DVD | <input type="checkbox"/> Chairs | Tables 6' round – Qty _____ | Tables 8' long – Qty _____ |
| <input type="checkbox"/> Other _____ | | | |

As the responsible person, I understand and agree to abide by the Facilities Use Policies & Procedures.

Signed by: _____ Date: _____

Entered on calendar by: _____ Date: _____