

# FACILITY USE APPLICATION FORM

## ► CONTACT INFORMATION

Contact Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Address: \_\_\_\_\_

## ► EVENT INFORMATION

Day(s) and Date(s) Requested: \_\_\_\_\_  
 Time In: \_\_\_\_\_ Time Out: \_\_\_\_\_  
 For recurring meetings: Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
     → (continuing use by outside organizations or groups needs to be re-verified **each year**)  
 Name of Group or Organization: \_\_\_\_\_  
 Purpose of Use: \_\_\_\_\_ Max. # of People: \_\_\_\_\_

## ► USAGE INFORMATION *Please check rooms or areas requested*

### ■ MULTIPURPOSE BUILDING 100 SERIES

- Main Floor 101 *(seating up to 450)*
- Round tables / how many needed? \_\_\_\_\_
- Banquet tables / how many needed? \_\_\_\_\_
- |                                        |                              |                              |
|----------------------------------------|------------------------------|------------------------------|
| ■ Upstairs Class Rooms                 | <input type="checkbox"/> 102 | <input type="checkbox"/> 103 |
| <i>(rooms have movable partitions)</i> | <input type="checkbox"/> 104 | <input type="checkbox"/> 105 |
|                                        | <input type="checkbox"/> 106 | <input type="checkbox"/> 107 |

### ■ KITCHEN 108 *(Kitchen Manager must be notified in order to use kitchen facilities)*

- |                                                     |                                         |
|-----------------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Cooking <i>(no frying)</i> | <input type="checkbox"/> Food Service   |
| <input type="checkbox"/> Beverage service           | <input type="checkbox"/> Coffee Service |

### ■ CHAPEL BUILDING 200 SERIES

- Main Chapel 201 *(capacity 175)*
- Nursery 207 (4 years and under)
- |                                                    |                                               |
|----------------------------------------------------|-----------------------------------------------|
| ■ Chapel Class Rooms: <input type="checkbox"/> 206 | <input type="checkbox"/> 208                  |
| <input type="checkbox"/> 209                       | <input type="checkbox"/> 211 <i>(largest)</i> |

### ■ EQUIPMENT NEEDS:

- |                                                |                                                                 |
|------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> Overhead projector    | <input type="checkbox"/> TV/VCR/DVD                             |
| <input type="checkbox"/> Podium                | <input type="checkbox"/> Power Point <i>(requires operator)</i> |
| <input type="checkbox"/> White Board           | <input type="checkbox"/> Sound <i>(requires soundman)</i>       |
| <input type="checkbox"/> Stage                 | <input type="checkbox"/> Coffee Service                         |
| <input type="checkbox"/> Piano and/or Keyboard | <input type="checkbox"/> Other _____                            |

► **CLEAN UP / LOCK UP INFORMATION**

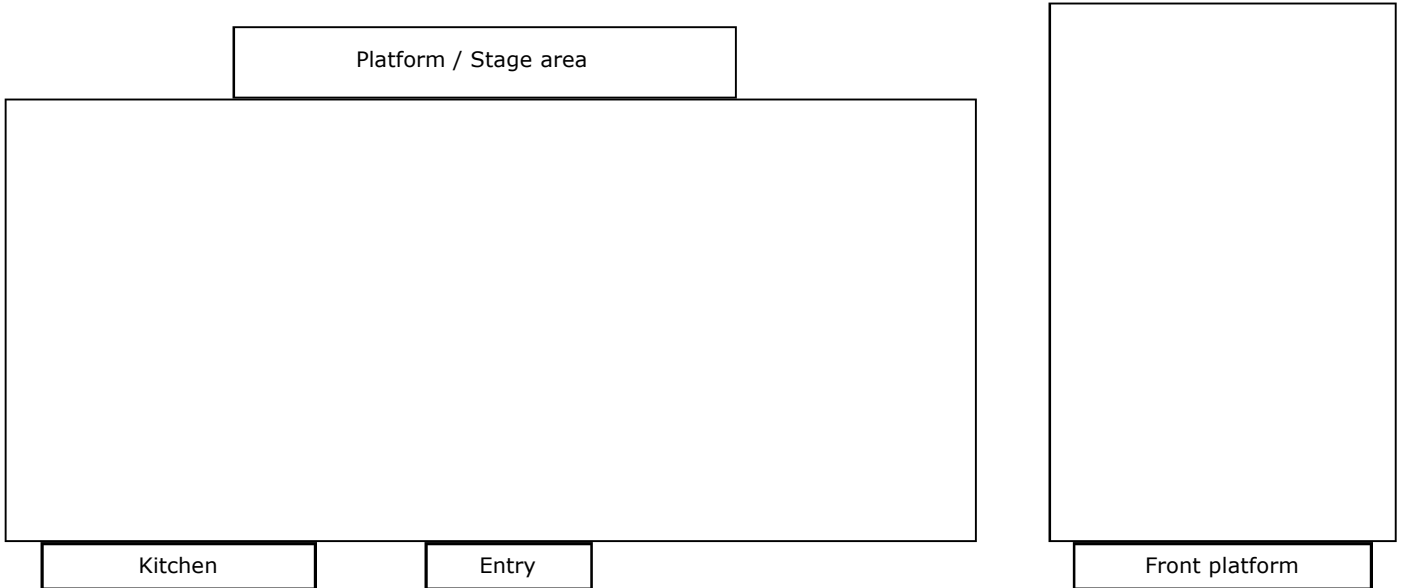
Person Responsible for Cleanup: \_\_\_\_\_ Phone: \_\_\_\_\_

*(Return rooms to original setup, mop any spills, empty trash)*

Person Responsible for Unlocking and Lock Up: \_\_\_\_\_ Phone: \_\_\_\_\_

► **MPB SET UP DESIRED:**

► **CHAPEL: SET UP DESIRED:**



► **AGREEMENT / SIGNATURE**

**I understand and accept** my role as “Person in Charge” for this event and will adhere to the guidelines for use of the facility. I will be responsible for and report any damage that may be incurred to the building and/or the equipment used.

**I release** Edgewood Bible Church, Edgewood, WA from liability for loss or damage to persons and properties in or on the church property for the duration of the scheduled event, as well as for the duration of all set-up and clean-up for the event.

By my signature, **I and my group agree** to safeguard the security of the building, and to honor the facility as a place of worship.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY BELOW THIS LINE:**

Date Approved: \_\_\_\_\_ Approved by: \_\_\_\_\_

Notes/Questions: \_\_\_\_\_

- Approved*
- Notified of Approval*
- Copy to Facility Manager*
- Entered on Outlook Calendar*