

**GRACE FIRST PRESBYTERIAN CHURCH
REQUEST FOR ONE TIME USE OF FACILITIES**

Date: _____

Date Received _____
(Church info only)

Fee Required _____ Paid _____

Name of Group Making Request _____

Contact Person _____
Print Name Signature

Day phone _____ Address _____

Purpose of Meeting/Use _____

REQUESTED USE:

Date needed _____ **Type of room needed** _____

Time needed:

For Preparation: from _____ A.M./P.M. to _____ A.M./P.M.

For Event: from _____ A.M./P.M. to _____ A.M./P.M.

For Clean-up: from _____ A.M./P.M. to _____ A.M./P.M.

People expected: Pre-school Age _____ Elementary Age _____
Youth _____ Adults _____

If there are children present who will not be involved in the program, they will need to be supervised by a representative of your group in a separate room.

Is such a room needed? _____ *For how many?* _____

Will refreshments/meal be served? _____ **Will the kitchen be used?** _____

Please note: There is a charge when the kitchen is used for preparation of refreshments or meals.

Fee _____ *Paid* _____

Who will prepare the food? _____

Time kitchen needed: from _____ A.M./P.M. to _____ A.M./P.M.

If the facilities are not returned to their original condition, there will be a charge assessed after any event. The church staff is not available for service to outside groups.

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Request Approved by _____ Date _____

Rooms(s) Assigned _____

Key # _____ issued to _____ returned _____