

EVENT REQUEST FORM

PLEASE SUBMIT AT LEAST TWO WEEKS PRIOR TO EVENT

Event or meeting to be placed on calendar			
Date of event		Day: _____ Date: _____	
Location/requested room			
Time (<i>Note: Meeting should end by 9 p.m. so church may be locked.</i>)		If setup required, what time do you need the room? _____	
		Start _____ End _____	
Recurring Event? Recurring events must be re-scheduled yearly by December 31st	Yes No	Start Date: _____	
		End Date: _____	
		What is date pattern? (Check all that apply)	
		<input type="checkbox"/> Sunday	<input type="checkbox"/> every week
		<input type="checkbox"/> Monday	<input type="checkbox"/> every month
		<input type="checkbox"/> Tuesday	<input type="checkbox"/> first
		<input type="checkbox"/> Wednesday	<input type="checkbox"/> second
<input type="checkbox"/> Thursday	<input type="checkbox"/> third		
<input type="checkbox"/> Friday	<input type="checkbox"/> fourth		
<input type="checkbox"/> Saturday	<input type="checkbox"/> fifth		
Number of Attendees			
Childcare needed? ___ Yes. ___ No. If yes, please complete a Childcare Request form.			
Need a vehicle? ___ Yes. ___ No. If yes, please complete a Vehicle Request form.			
Need food service assistance or use of the kitchen? ___ Yes. ___ No. If yes, please complete a Food Services Request form.			
Additional comments. Include special equipment needs, such as sound system; special support needs, such as sound system operator. Classroom configurations need to remain as arranged. The only room with flexibility is the Family Life Building . If you wish to diagram this room, please use the back of this form.		Note: Weekend assistance to rearrange rooms is not available; it is the requester's responsibility to ensure the rooms are returned to original configuration.	

Name of person making request: _____

Date: _____ Phone: _____

STAFF USE ONLY:

Ministerial Staff Approval of Event: _____ Date _____
 (Please return to Ann or Penny)

Date, location, equipment and support needs approval: _____ Date _____

Requester notified: _____ Date _____

Posted to Resource Calendar: _____ Date _____

USE OF FACILITIES BY NON-FBC GROUPS

1. For profit group will pay a fee for:
 - a. Use of the facility - \$150
 - b. Custodian - \$50
 - c. Set up and breakdown of the space - \$50
 - d. Sound technician - \$150
 - e. Projectionist - \$50

2. Non profit groups not a ministry will pay the following fees:
 - a. Custodian - \$25
 - b. Set up and breakdown of the space - \$25
 - c. Sound technician - \$150
 - d. Projectionist - \$50

3. Ministry groups pay no fees; FBC pays the following:
 - a. Custodian - \$25
 - b. Set up and breakdown of the space - \$25
 - c. Sound Technician - \$150
 - d. Projectionist - \$50

For all the above – when a hostess is available, cost will be \$75.

For programs beyond two (2) hours in length, all fees will be prorated.