



Facilities Use Request Form

INSTRUCTIONS:

Please fill out this form and turn it into the church office at least two weeks in advance of your event. You will receive an approval or denial for your facility request within three business days from Pastor John. Thank you for your cooperation.

GROUP and APPLICANT INFORMATION		
Name of Ministry/Group _____		Today's Date _____
Name of Applicant _____		
First Name	Last Name	
Applicant's Address _____		
Street	City	ZIP
Applicant's Telephone Number () -		
Applicant's Email Address (please print) _____		
Type of Event <input type="checkbox"/> Party /Celebration <input type="checkbox"/> Ministry Use <input type="checkbox"/> Meeting <input type="checkbox"/> Other (please specify): _____		Attendee Information <input type="checkbox"/> Adults (18 yrs +) <input type="checkbox"/> Children (17 yrs & under) Approx. # of attendees: _____
Member or regular attender of BFCC who will be present: _____ <input type="checkbox"/> I have access to the building. <input type="checkbox"/> I will need access to the building.		
FACILITIES/EQUIPMENT REQUEST		
Facility Requested (Check all that apply): <input type="checkbox"/> Auditorium/ Worship Center <input type="checkbox"/> Beach Shack/ Elementary <input type="checkbox"/> CM Classroom(s) 2 _____ 3 _____ <input type="checkbox"/> Kitchen <input type="checkbox"/> Lounge <input type="checkbox"/> Outside Lawn <input type="checkbox"/> Other: _____	Audio/Visual Requested <input type="checkbox"/> TV/VCR/DVD <input type="checkbox"/> Projector & Screen <input type="checkbox"/> Sound System <input type="checkbox"/> Other _____ _____	Date(s) Requested: <hr/> Start Time: <hr/> End Time:

DEPOSIT & FEE: A deposit check for \$200, and a separate usage check for \$50 is required with this completed form to reserve BFCC facilities. Your deposit check will be refunded when the facilities have been inspected after your event. Please make checks payable to Bay Farm Community Church.

---FOR OFFICE USE ONLY---

Approved By _____ **Approval Date** / /

Deposit Paid On / / **Check #** **Cash**

Fee Paid On / / **Check #** **Cash**

Other Charges (See Below) ITEM/DESCRIPTION OF CHARGES		AMOUNT CHARGED