

REQUEST FOR USE OF FACILITIES

Thank you for your interest in Main Street UMC’s facilities. Please complete this form and a Building Steward will be contacting you to address any needs or concerns. Main Street UMC is happy to share our facilities with non-profit individuals, groups and organizations. *Utility costs make usage fees necessary*, and apply to all groups, even if several members of the group are members of Main Street UMC; for those fees please refer to the *Guidelines for Use of Facilities* form.
For community events, we would like to provide a representative to welcome those attending the event to our church facilities.

NAME of GROUP/PERSON: _____

TYPE OF MEETING/EVENT: _____

One time event/activity **Ongoing:** **Weekly** **Monthly** **Other (specify):**

Day/Date(s): _____ **Time event will begin:** _____ **Time expected to end:** _____

Number of People Expected: _____ **Set up time:** _____ **Cleanup & Take down until** _____

Rooms(s) Requested: Sanctuary [Fire code capacity: Main Level – 325, Balcony – 125] ***Restrictions on use do apply**

Nursery Spares & Pairs Classroom [34 & 35] Mini Kitchen

Christian Fellowship Classroom [#18] Baraca/Berean Classroom [#23] Young Adult Classroom [#22]

Fellowship Hall [Fire code capacity / # of persons: Seating in chairs only – 377; Standing only – 880; Table & Chairs – 176

Fellowship Hall Kitchen **If Kitchen Use Requested, Please specify needs:**

serving counter only refrigeration stove & oven convection oven ice machine

EQUIPMENT REQUESTED: NOTE: Please write number needed beside each item checked.

Tables #: Chairs #: [User is expected to set up and take down tables and chairs] Sign holders #:

Sound Equipment [NOTE: **Sound engineer must be present.**] Specify:

Instruments [Note: **Special permission & Instructions apply**] Piano Organ (**to be played only by MSUMC Organist**)

Other Special Needs:

Responsible Party [First & last name required] Address (Street and City) Phone [home/cell/business]

Adult Leader(s) to be in attendance the full time of the meeting/event:

Name Address Phone [home/cell/business]

I have read the conditions outlined on the *Guidelines for Use of Facility* form and agree to abide by same, and to make every effort to insure that our guests do likewise, if we are permitted the use of these facilities.

Signature of Responsible Party

Date

For use by church office: **Date Request Received:** _____

Request approved by Pastor? Yes No **Pastor:** _____ **Date:** _____

Building Steward has met with and approves use: _____ **Date:** _____

Activity placed on calendar: **Name:** _____ **Date:** _____

Copy of approved/denied form sent to Responsible Party

Others needing the information have been notified:

Security Personnel Organist/Pianist Sound Technician Kitchen Steward