



Church Program and Room Reservation Request Form

Department:

Head of Dept:

Program Date:

Program Chair:

Date of Request:

Departmental Representative:

Please Describe the Program:

Budget Amount:

Please provide detail on how funds will be used:

Do you need to reserve a room with this request: Yes No

What are the date(s) and time(s) you will need the room:

How long will you be using the room: Hour(s)

Do you need time to setup before your event: Yes No

What is the date and time you will need the room/building open for your setup:



Which rooms are you requesting in the Church:

Sanctuary

Kitchen

Mother's Room

Fellowship Hall

Parking Lot

Which rooms are you requesting in the Family Life Center:

Event Hall

Multipurpose Room

Large Conference Room - #105

Large Conference Room - #108

Board Room

Studio

Reception Area

Cafe

Caterer's Kitchen

Parking Lot



Please describe what you will be doing in the room/space you are requesting:

Have you met with Department Elder to discuss this request: Yes No

If no, is there a reason that you have not been able to meet with your elder? Please explain below:

Date of meeting with Elder:

Signature of Department Head:

Signature of Elder:

Signature of the Pastor: