

CHURCH FACILITIES RESERVATION REQUEST FORM

Name of Organization/Group _____ Date: _____

Date of Event _____ (Non-church events may not be calendared sooner than 90 days before an event and no later than two weeks prior to an event or on Wednesday or Sundays.)

Contact's Name _____ Phone No. _____

Email address: _____

Mailing Address _____

Person in Charge of Setting Up _____ Phone No. _____

Number Attending _____ Time of Event: _____

Facility Needs to be Open From _____ Until _____

Rooms/Area Needed _____

**NOTE: Kitchen is not available for use for non-church related events.
Cost: \$125 for half the Fellowship Hall/ \$250 For entire Room/Sanctuary \$200**

Set Up/Special Instructions _____

Person Responsible Signature: _____

Caterer: _____ (Business License must be on file in Church Office)

Caterer has Read and Signed Caterer's Form (Initial) _____ or Caterer's Form on File (Initial) _____

Keys (MBC Members Only) Checked Out (Initial) _____ Checked In (Initial) _____

If custodians are responsible for setting up for non-church related events, a fee may be charged as determined by the custodial contractor responsible. **Checks are made out to Bill Burgess.** The person responsible for this event must contact the church office to make arrangements prior to this event.

For more information, please contact Rev. Jack Dodds, Staff Representative
In the Church Office at 585-5457, Ext. 6 or FAX 585-6217

Date of Request: _____ Date Approved: _____

Date Group Notified: _____ By Whom: _____