

BEREAN BAPTIST CHURCH
517 Glensford Drive ~ Fayetteville, NC 28314
(910) 868-5156

GENERAL USE FACILITY REQUEST FORM

Date of Event _____ Day of Week _____ Start Time _____ End Time _____

1. Name of Organization/Class/Individual(s) _____

2. Name/Address of Requesting Party _____

3. Home Phone # of Requesting Party _____ Work Phone # _____

4. Describe the Event to be held _____

5. Date & Time Requesting Party will Set Up _____

6. List all buildings/rooms you desire to use _____

7. Expected Number of People to attend (please indicate by age group) Adult _____ College _____

Sr. High _____ Jr. High _____ Grades K - 6th _____ Preschool _____ Nursery _____

8. Will food or refreshments be served? Yes _____ No _____

If yes, will you need any of the following equipment? Dishes _____ Cup Saucers _____ Glasses _____
Ovens _____ Grill _____ Dishwasher _____ Coffee Pot _____ Table Cloths _____ Mixer _____
Silverware _____ Slicer _____ Freezer _____ Large Refrigerator _____

9. If using the Coffee Shop, how will you be paying for the coffee? ___ Donation ___ Individual ___ Ministry

10. Number of tables required: Round _____ Rectangle _____ Number of chairs _____

11. Please diagram your set up below for the room requested:

12. Will you require any multi-media technical support listed below?

- | | | |
|---------------------|---------------------|-------------------------|
| * P.A. System | *Video Projector | *Large Pull-down Screen |
| *Cassette/CD Player | *Overhead Projector | *Stage Lighting |
| *TV/DVD Player | *Easel/Board | |

Approved by: _____ Date _____ Orig. to Admin. _____ Copies to: _____
_____ Multimedia _____ Requested Party _____

12. Please initial each of the following to acknowledge the requirements for use of the facilities:

a. Set up and take down is to be done by the requesting party. _____

13. Please indicate person responsible for:

a. Person responsible for kitchen supervision (see note below): _____

b. Person responsible for kitchen cleanup: _____

c. Person responsible to unlock facilities: _____

d. Person responsible for setup: _____

e. Person responsible for cleanup: _____

f. Person responsible for locking up facilities: _____

Note: Kitchen supervisor must have knowledge and experience in using and cleaning the coffee pot, cooking grill, ovens and table cloths.

Signature of Individual Making Request

Date

- Use of the church facilities for non-regular church program activities **must be arranged well in advance** through the church office, followed by the completion of this form that **must be submitted at least two weeks** prior to the event date.
- Upon the approval by the Director of Operations, the event will be placed on the church Calendar of Events.
- Your completion of this form indicates your assumption of the responsibility for the facility when used outside normal working hours, including security of the building during and after the activity, and turning on and off lights and other utilities.
- Room arrangements and set-ups are the responsibility of the person or group making the request. If your event requires a special set-up, please submit a drawing or diagram in addition to this form. Special furniture or equipment needs should be arranged at the time this form is completed and submitted.
- If no special set-up is required, **you must leave the meeting room(s) in its original set-up or arrangement.**
- Please make sure that all leftover food products and trash is properly disposed of.
- Please note that regular and special programs of BBC will always take precedence over requests.
- **No commercial or profit-making organization will be granted use of the facility.**