

FACILITY RESERVATION REQUEST FOR ST. JOHN BAPTIST CHURCH FACILITIES

Deadline for submitting: Must be in Church office Ten (10) days before or the week before the week the use of the room is required

IF REQUESTING THE KITCHEN AND/OR PANTRY, PROOF OF FOOD HANDLERS CARD(S) MUST BE ATTACHED OR ON FILE IN OFFICE BY ALL WHO WORK IN MINISTRY.

		1. DATE FORM SUBMITTED	
2. DATE REQUESTED _____ RECURRING _____ NON- RECURRING		3. TIME (Include set-up thru clean-up time.)	
4. FACILITY REQUESTED ___ SANCTUARY ___ FELLOWSHIP HALL ___ KITCHEN ___ COMPUTER ROOM ___ NURSERY ___ PANTRY ___ LIBRARY (ROOM 108) ___ WOMEN'S LOUNGE (ROOM 110) ___ MEN'S LOUNGE (ROOM 202) ___ FINANCE OFFICE ___ ROOM 111 ___ ROOM 112 ___ ROOM 113 ___ ROOM 114 ___ ROOM 115 ___ ROOM 116 ___ ROOM 117 ___ ROOM 118 ___ ROOM 119 ___ ROOM 120 ___ ROOM 121 ___ ROOM 122 ___ ROOM 201 ___ ROOM 203 ___ ROOM 204 ___ ROOM 205 ___ ROOM 207 ___ ROOM 208 ___ ROOM 209 ___ ROOM 210 ___ ROOM 211 ___ ROOM 212 ___ ROOM 213 ___ ROOM 214 ___ ROOM 215			
5. PROGRAM NAME OR TITLE (Print)			
6. PROGRAM DESCRIPTION _____ Worship Service _____ Choir Rehearsal _____ Bible Study _____ Wedding _____ Wedding Rehearsal _____ Ministry Meeting _____ Ministry Event _____ Ministry Workshop _____ Dance/Praise Rehearsal _____ Non-Ministry Use (Explanation)			
7. NUMBER EXPECTED TO ATTEND:			
8. SPECIAL REQUIREMENTS AND FACILITY SET-UP (Please Print) Use diagram if necessary and furnish any additional information on requirements, i.e., table/seating arrangements etc.....			
9. EQUIPMENT REQUIRED _____ Video Tape Player _____ Television Monitor _____ Overhead Projector _____ Screen _____ Cassette/CD Recorder _____ Podium _____ Extension Cord _____ Other (Specify) _____			
10. SIGNATURE OF REQUESTER		11. WORK PHONE	
13. SIGNATURE OF MINISTRY DIRECTOR		15. HOME PHONE	
14. WORK PHONE		12. HOME PHONE	
COORDINATION (For completion by Church Staff)			
<div style="border: 2px solid black; padding: 5px; min-height: 80px;"> ADDITIONAL INFO OR COMMENTS: </div>	STAFF MEMBER PROCESSING REQUEST		INITIALS
	PASTOR REAVES		DATE
In signing this form I agree to abide by the procedures and responsibilities for use of the church facilities including those found on the reverse side of this form.			

(Keep a copy of your approved form)
RESPONSIBILITIES FOR USE OF ST. JOHN FACILITIES

1. To schedule any of the church facilities, please complete this form the week before the use of the room is required. This form can be obtained from the secretary's office. Office hours are from 10:00 a.m. to 6:00 p.m. Monday - Thursday.
2. St. John Baptist Church Worship Services/Programs have priority over all other activities or programs.
3. All activities should have a minimum of 30 minutes between them to allow for clean up of previous activity and set up of the next one.
4. In the event your program/activity is cancelled, be sure to contact the church secretary at 855-9351 as soon as possible so that unnecessary set-ups are not preformed.
5. At the close of your program/activity, whether you have used the sanctuary, fellowship hall or kitchen area, unless Staff Support was provided, you are responsible for the following:

◇ **SANCTUARY**

- A. ENSURE HYMNAL AND BIBLES ARE REPLACED NEATLY IN PEW RACKS.
- B. ENSURE BULLETINS AND/OR PAPERS ARE CLEARED AWAY.
- C. NO FOOD OR DRINK IS PERMITTED IN THE SANCTUARY
- D. FOR WEDDINGS.... USE DRIPLESS CANDLES ONLY.

◇ **FELLOWSHIP HALL**

- E. RESTORE FELLOWSHIP HALL TO ORIGINAL SET UP.
(Return to the way you found it.)
- F. TAKE OUT TRASH TO DUMPSTER IN PARKING LOT.
- G. SWEEP (If needed)
- H. ENSURE ALL ELECTRICAL APPLIANCES ARE TURNED OFF AND UNPLUGGED.

