BUILDING USE FORM
(for GSUMC Ministry Teams & Members)

Today's Date _____

Ministry Team _____ Contact Name _____

Member Name _____ Phone Number _____

Date(s) of event _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
(i.e. 1/1 2/1 3/1 4/1 etc.)

Set-Up and Clean-Up time of the event: _____ to_____ Actual time of the event: _____

Describe nature of the function for which facility is being requested: _____

_____

_____

Room(s) or area desired □ Room 204 (large room) □ Room 205 (small room) □ Sanctuary
□ Fellowship Hall □ Kitchen □ Library □ Cry Room

I will need
□ Use of *Sanctuary* Sound System □ Use of *Sanctuary* Projection System/PowerPoint/DVD
□ Use of *Fellowship Hall* Sound System □ Use of *Fellowship Hall* Projection System/PowerPoint/DVD

Anticipated number of disposable paper or plastic products needed for the event
Paper Plates _____ Paper Cups _____ Paper Napkins _____
Disposable Bowls _____ Disposable Silverware _____

Additional Comments Section

Team Leaders – You are responsible for contacting the office to schedule meetings/events & time changes

For office use only

Approved by_____ Date _____ rev 12/2014