

<input type="checkbox"/> Original Request
<input type="checkbox"/> Revision
<input type="checkbox"/> Setup Revision
<input type="checkbox"/> Cancellation

GOOD SHEPHERD PRESBYTERIAN CHURCH

USE OF FACILITIES REQUEST AND ROOM SET-UP INSTRUCTIONS

(please return completed form to church office)

Today's Date _____

1. Name of Group _____
 Address _____

Name of Representative (to be present) _____

Phone: Work () _____ Home () _____
 Fax: Outside Group _____ Email: _____

2. Day _____ Date of Event _____ Time: Begin _____ End _____

Weekly _____ Bi-Weekly _____ Monthly _____ One-Time Event _____

If a regular meeting: Start Date _____ End Date _____

Exact time you **need access to rooms for set-up** _____

Actual beginning time of event _____

Nature of Activity _____

Insurance _____

Expecting How Many? _____ Set-up on reverse must be completed

3. Rooms Needed: **It is your responsibility to notify GSPC within 48 hours prior to cancellation of an activity to avoid usage fees.**

<input type="checkbox"/> Sanctuary	<input type="checkbox"/> Classrooms _____	<input type="checkbox"/> Nursery	<input type="checkbox"/> Zirbel Hall
<input type="checkbox"/> Fireside Room	<input type="checkbox"/> Room 4 (Round Room)	<input type="checkbox"/> Brides Room	<input type="checkbox"/> Youth Room
<input type="checkbox"/> ___East ___West	<input type="checkbox"/> Room 5	<input type="checkbox"/> Library	<input type="checkbox"/> Other _____
<input type="checkbox"/> Kitchen			

4. Equipment and Supplies Needed: (set-up requirements on reverse)

Tables: Round Rectangular
 Chairs: (how many) _____
 1 Microphone – Type _____ (Sanctuary, Zirbel Hall)

Additional Instructions: _____

Will food be served? _____

The following are available for an additional \$50.00 fee:

2 or more microphones
 VCR and Monitor
 Projector-Video
 Digital Camera
 Lap Top

Schedule with: Don Broun - Sound/Video Technician

5. Personnel Needed: \$ _____ Custodian

6. Will a fee be charged or offering taken? _____

*****FOR OFFICE USE ONLY*****

_____ Placed on Calendar _____ Confirmation By: _____
 _____ Room Assigned _____ Room Usage Fee Date: _____

Set Up Requirements
(must be completed at time of reservation)

Zirbel (Fellowship) Hall:

Kitchen

Stage

Entrance

Piano

Double Doors

Fireside Room:

Kitchen

Piano

Conference Table

Fireplace

Sliding Doors

Entrance

Other – Room # _____