HermNAz

building request form

Note: use this form for personal requests.

|  |  |
| --- | --- |
| Name/Main Contact: |  |
| Address: |  |
| Phone: |  |
| Email: |  |
| Date of Event: |  |
| Time: To/From |  |
| Time in/Time out of the building |  |
| Alternative Date: |  |
| Type of Room: | Ministry Center Sanctuary Kitchen  |
| Description of Event: |  |
| Number of people: |  |

Remember that other ministries are using the same rooms you are. Please clean up and set the room back up before your leave. Leave it better than you found it. Be a blessing!

Signature of Approval:

I have read the facility use policies and agree to abide by them. I agree to leave the facility clean and presentable.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For office use only: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Approved/Date

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Placed on calendar