

TEMPLE BAPTIST CHURCH
801 S. Lower Sacramento Rd., Lodi, CA 95242
(209) 369-1948

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/room(s) you desire to use** _____

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

Sr. Hi _____ Jr. High _____ Gr. K-6 _____ 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 _____ Lg. Refrigerator _____

9. **Number of tables required:** Round _____ Rectangle _____ **Number of chairs** _____

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

11. **Will you require any multi-media technical support listed below? If so, you must complete the attached form.**

- P.A. System Overhead Projector Slide Projector
- Video Projector Large Pull-down screen Cassette/CD player
- Overhead Projector Slide Projector Stage Lighting

Approved by: _____ Date _____ Orig. to Admin. Kathy _____ Copies to: SO _____ Alan _____ AJ _____ Carl _____ Multimedia _____ Requested Party _____ Fax JECHS _____
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12. Will you require any paper goods? If so, please indicate quantity. (A small fee will be applied)

<u>Quantity</u>	<u>Item</u>	<u>Quantity</u>	<u>Item</u>
_____	Dinner Plates	_____	Dessert Plates
_____	Divided Dinner Plates	_____	Small Bowls
_____	Napkins	_____	6 or 8 oz. Cups
_____	Forks/Knives/Spoons (circle item needed)		

13. 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. _____
Note: A custodian will be available during regular work hours to provide direction and assistance.
- b. Requesting group must contact church when paper/kitchen supplies are to used _____
- c. Requesting group understands that some events may require church personnel to assist with supervision or cleaning payable at \$10-15 per hour per person _____

14. 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 clean up: _____
- f. Person responsible for locking up facilities: _____

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

Signature of Individual Making Request

Date

3/5/03