

Request for VSPC Facilities and Equipment Usage
Minimum one hour between functions is required

Name of Event: _____ Date of Request: _____

Day(s) and Date(s) of Event (include year): _____

Room Requested: _____ Time of Event: _____ am to _____ am (NLT 10:00pm)

Setup and Coordinator Arrival Time _____ am (NLT 07:00PM Sat.)
pm

Who is your TRAINED Kitchen Representative: _____

Sponsoring Ministry: _____

Person responsible for event: _____ Telephone: _____

Email: _____

Security Procedure: Custodians will lock the event building entrance doors 20 minutes after event start time. Please make arrangements for later arrivals. This policy also applies to the nursery.

Purpose of Event/Impact on Facilities, Church Body/Target Group: _____

Approximate Number of People Attending: _____

Equipment Needed

Number of Tables Required: _____ Number of Chairs Required: _____

Please circle the items below that you will need for your event:

Whiteboard Podium Sanctuary Projector PC Cart DVD/VHS cart

Sound: _____

Other: _____

NOTE: SOUND AND SANCTUARY PROJECTOR REQUESTS MUST BE SUBMITTED 2 WEEKS PRIOR TO THE EVENT. CONTACT CHRIS COMBS CCOMBS@V7PC.ORG

NOTE: IF YOU PLAN TO USE AN APPLE PRODUCT FOR PROJECTION, YOU MUST PROVIDE THE ADAPTOR.

Will there be food/drink served? _____ If "Yes", please detail: _____

NOTE: IF YOU REQUIRE LH KITCHEN USE, YOU MUST CONTACT MARYANN ROBISON @ 937-416-2094

NOTE: IF YOU REQUIRE NURSERY FOR YOU EVENT, YOU MUST CONTACT CHILDCARE COORDINATOR 574-6700 X131.

Sound
Approved _____
Disapproved _____
Initials _____
Date _____

Nursery
Approved _____
Disapproved _____
Initials _____
Date _____

Facilities Approval
Approved _____ Disapproved _____
Initials _____ Date _____