



Date Received by office

The Bertha E.R. Strosacker Memorial Presbyterian Church

BUILDING AND ROOM USE INFORMATION FORM

(This form **MUST** be filled out in its entirety before an event can be placed on the church calendar)

Name of Group or Event _____

Contact person in charge _____

Phone of contact _____ E-Mail _____

Mailing address of contact _____

Date form filled out _____

Date of requested event _____

Will participants be charged a fee? _____

If a recurring event, please describe _____

Room space requested _____

Total time of event (includes setup and take down) _____

Please complete attached sheet for room set-up

Rooms will be neat and clean when you begin your meeting or activity.

Please straighten up before you leave, and turn off lights. During the school (program) year the building closes at 8 p.m. Monday through Friday and 5 p.m. on Saturday. Summer hours may be different. Exceptions to these hours can be considered.

There is absolutely **no smoking** in the building. Smoking is permitted in the Allen Street parking lot only. **Alcohol is prohibited.**

Event fees can be incurred for facilities and custodial support. Fees are payable to the Church office before the day of event during regular office hours Monday-Friday from 8:30am - 4:00pm.

If kitchen use is approved, please "leave it like you found it".

If food is to be prepared in the kitchen, a "one time" commercial license must be obtained from the City of Midland, by the event coordinator. In this case, a trained person in charge needs to be on site to oversee operation of equipment.

Please provide the church office a two week notification if the event is to be cancelled.

Staff Review _____

Social Concerns Committee Review _____

Session Review _____

Name of Event _____

Time of Event including setup and cleanup times _____

Date of Event _____

Please provide diagram of Room/Space Set-Up Desired and Equipment Needed

(i.e. tables, chairs, spacing...)

Equipment Requested:

TV_____

Sound Equipment_____

VCR _____

Wheel Chair_____

DVD _____

Laptop_____

LCD Projector_____

Easel_____

Additional assistance required _____