

SMOKY HILL UNITED METHODIST CHURCH

Building Use Application

Single Event

Multiple Event

(Duration not to exceed 12 months)

Name of Group/Organization: _____ Application Date: _____

Group is... Not for Profit For Profit Other (Check One)

Name of Applicant: _____

Email: _____

Address: On File _____

Phone Numbers: Work _____ Home _____

Cell _____ Fax _____

Days and Hours of Usage: Day(s) Requested

Mon.

Tues.

Wed.

Thurs.

Fri.

Sat.

Sun.

Frequency: Weekly Monthly

Beginning Date: _____ Ending Date: _____

Time: From _____ am/pm To _____ am/pm

Purpose of Use: _____

Estimated number of participants: Adults: _____ Children: _____

Participating SHUMC member(s): _____

Initial all area(s) requested (See **Building Use Fee Schedule** attached):

____ Sanctuary ____ Kitchen ____ Nursery ____ Parking Lot

____ Celebration Hall ____ Classroom(s) ____ Playground ____ Gazebo

____ Gathering Space ____ Choir Room ____ Upper Room/Chapel

____ Audiovisual support requested (\$50 per hour per technician.)

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Equipment needed, include number of each item needed (no fee required). ***Applicant is responsible for set up/clean-up/returning room and equipment to original setting.*** Note number requested:

Table(s)_____ Chair(s)_____ Podium_____ Sound System_____ Microphone(s)_____

Piano_____ Other_____

Kitchen Equipment (list needed equipment below)

Notes:

Applicant's Signature _____ Date _____

DEPOSIT REQUIRED TO HOLD CALENDAR DATES.

IF CANCELLED, A PART OF OR ALL OF THE DEPOSIT MAY BE FORFEITED.

For Office Use Only:	
Staff Approval _____	Date _____
Comments _____	

Trustee Approval _____	Date _____
Comments _____	

