First Baptist Church, Lyman
Calendar/Facilities Request Form

Request from:

    Name: _____ Today's Date: _____

    Address: _____

                  _____

    Phone: _____ Cell: _____ Email: _____

Date requested to be added to the church calendar (mm/dd/yy): _____

Church Function (yes/no):_____ Purpose of Event: _____

_____

Person/Group Sponsoring the event: _____

Times: Set Up: _____ Time of Event: _____ Clean Up:_____

Building Requested:

☐ Sanctuary   ☐ Fellowship Hall ☐ Family Life Center ☐ Kitchen ☐ Entire Facility

          ☐ Mission House   ☐ Conference Room ☐ Other: _____

Will food be prepared and served? ☐ Yes ☐ No   Will sound equipment be used? ☐ Yes ☐No

Who will be the sound technician? _____

Transportation: Van   Who will be your driver? _____

Please draw a diagram of the setup below:

Calendar Request Guidelines *(Please read and sign below):*

1. **All dates (team/committee meetings, church groups, personal functions, etc.) for First Baptist Lyman calendar must be submitted to the church office by using the calendar/facilities request form.**

2. **No date will be placed on the calendar until the forms have been submitted and cleared by staff. This will prevent conflicts and any misunderstandings.**

3. **The staff will review any schedule conflicts. The person making the request will be notified if a conflict is apparent. All event requests are on a first come first serve basis;** *however, staff has first choice should an event come up that the facility needs to be used for a church wide purpose, church members second choice and non-church members have third choice.*

4. **The person making the request will be responsible for clean up and set up for upcoming Sunday/Wednesday event(s).**

5. **The person making the request will be responsible for taking out the trash before leaving.**

6. **The assistant custodian will be responsible for unlocking and controlling the thermostat.**

7. *I agree to clean up and notify the church office if I become aware of facility concerns.*

Sign: _____Date: _____

OFFICE/STAFF USE ONLY:

Read and Approved by: _____ Date: _____