

TRINITY UNITED METHODIST CHURCH FACILITY USE REQUEST FORM

1. **DATE OF EVENT:** _____ **TIME OF EVENT** _____ to _____
What time do you need access to the building _____
2. **CONTACT PERSON** for this Event _____ **Phone #** _____
3. **TYPE OF EVENT** _____
Area of building to be used _____
4. Approximate Number of People Attending _____
Non-Member—Please, provide a Certificate of Insurance naming *Trinity United Methodist Church of Evansville, INC.* as an additional insured party.
5. Will food be served (circle one) YES NO
6. Will you use our kitchen? (circle one) YES NO
If yes, will you use our kitchenware? (circle one) YES NO
7. **CATERED** by Outside Source: (circle one) YES NO
Name of Caterer _____
8. **TABLES NEEDED**
of round tables _____ # of Chairs at each round table (circle one) 6 or 8
of rectangular serving tables _____
- a. **TABLE LINENS to be used** (circle one) Yes No
(There will be an **additional cost to you of \$12.00/table cloth** to have the table linens laundered at our vendor.)
- b. **COLOR:** White Black Burgundy Gold (circle any that apply)
- c. **TABLE SKIRTS**— (circle one) Yes No **If yes** (circle one) White or Black
8. **Audio Equipment** needed (circle one) Yes No List: _____
9. **Lectern:** (circle one) YES NO
10. **Comments:** _____

*Please draw a diagram of floor plan (if needed) on back of this sheet of paper if you need a special set-up of the tables or chairs. If you have questions contact Kelly at the Church Office—812-423-4495

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Do not write below this line—for Trustee and office use only

Event Approved: Yes _____ No _____

FEE \$ _____ OR Fees Waived: Yes _____ No _____

Date _____ Approved by _____

Clean up required (circle one) YES NO

Desktop - Jean's iMac/New 2018 Building Request Form

NO ALCOHOL OR SMOKING ON PREMISES