

Evangelical Covenant Church
FACILITY USE FORM
GENERAL

COPIES TO:
___ NR ___ LB ___ KS
___ CM ___ MH ___ DN
___ DG ___ OTHER _____

Date of Use _____

Time of Event (starting and ending) _____

Time You Would Like the Church Open _____ Approximate Number of Participants _____

Name of Organization/Event _____

Contact Person _____

Address _____ Phone _____

BUILDING AREA REQUESTED

Main Building:

___ Worship Center ___ Courtyard ___ Kitchen ___ Youth Center ___ Classrooms (# ___)

Family Life Center:

___ Assembly Room ___ Classrooms (# ___) ___ Gym ___ Kitchen

EQUIPMENT/OTHER REQUESTED

___ TV/VCR/DVD ___ Overhead ___ Flip Chart ___ Video Projector

___ Sound/Projection (requires sound person if in Worship Center)

SET UP NOTES

(Please note here your set up needs, i.e. chairs only, tables and chairs, piano. Please indicate the number of chairs and tables you will need and if you need 8' tables or round tables)

CHARGES

Worship Center	\$ _____
Courtyard	\$ _____
Assembly Room	\$ _____
Kitchen (limited or full use)	\$ _____
Classrooms	\$ _____
Gym	\$ _____
Custodial	\$ _____
Sound/Projection Technician	\$ _____
Other (i.e. candles)	\$ _____

Total	\$ _____
Down Payment	\$ _____

Balance Due	\$ _____

I have read the Building and Usage Policies and will abide by them, I have requested the space and/or equipment designated on this form, and I agree to be responsible for paying the costs listed above and any additional costs incurred by my usage or damage to facility.

Signature of contact person _____ Date _____

Return to:

Evangelical Covenant Church
5405 Hart Lane NW
Bemidji, MN 56601

Fees will be determined by # of people
and rooms needed

evancov@paulbunyan.net

Fax: 218-444-1373