

OVUMC FACILITY USE REQUEST - CHURCH FUNCTION

A church function is being planned for: Day of week _____ Date ____/____/____

Beginning time _____ Ending time _____

Is extra time needed for set-up? yes / no Set-up start time: _____ Clean-up time: _____

This function is ___One time ___Weekly ___Monthly ___Other (Specify) _____

Number of people expected: _____ adults _____ children

Room(s) requested: ___ Multipurpose Room ___ New kitchen ___ Lobby to the MPR
___ Fellowship Hall (Rm 17) ___ Small kitchen ___ Small Chapel
___ Sanctuary ___ Narthex ___ Library
___ Room 1 -Adult w/table ___ Youth Room ___ Room 8- Nursery
___ Room 5 – Adult w/table ___ Room 6 – Adult w/o table ___ Play yard
___ Room 7 Children Pre K ___ Room 9 – Children K/1/2
___ Room 12 – Children 3/4/5 ___ Other _____

The function that is being planned is _____

The sponsoring group is _____

The contact person is _____ Contact's phone _____

Contact's email _____

All set-up, supplies, and clean-up are the responsibility of the sponsoring group and contact person.

This form is to be submitted to the church office. Date request is submitted ____/____/____

Contact the administrative assistant for confirmation of availability (910)278-5973 M-F 9-12 or send an email to: ovoffice@gmail.com

Office use

Contacted on date: ____/____/____

Available ___Yes ___No

Added to desk calendar ___Yes ___No

Approved by: ___Admin Asst.

___Director of Music

___Pastor (Init. _____)

Church Calendar Updated _____ Date ____/____/____

Please note:

To request any audio-visual equipment or technical help you must also contact Greg Walker at ovumcmusic@gmail.com or leave your request in the mail box outside of the music room.