Cross of Hope Church *Request Form for Building Use* *(rev. 8/16/06)*

Name of Event or Purpose _____

Contact Person _____ Phone _____ Email _____

Please check all selections applicable to your request, include time needed for set-up and clean-up:

____ **One-time Event** Date ___/___/____ **Actual Event Time** _____ am/pm, until _____ am/pm

Time Needed For Setup and Cleanup: _____ am/pm, until _____ am/pm

____ **Continuing Event** Start Date ___/___/____ Ending Date ___/___/____ Day(s) S M T W Th F S

Event Occurs: ___ Every Week, or _____1st _____2nd _____3rd _____4th _____5th Week(s) of month

Actual Event Time _____ am/pm, until _____ am/pm

Time Needed For Setup and Cleanup: _____ am/pm, until _____ am/pm

____ Free Event ____ Fee based event Number of adults expected to attend _____ Children _____

____ Chairs & Tables Requested (please fill out Properties section on the back of this form)

____ Childcare Requested (please fill out Nursery section on the back of this form; subject to approval).

____ Sound System Requested (please fill out Media section on the back of this form; subject to approval).

____ HeBrews Requested (please fill out HeBrews section on the back of this form; subject to approval).

____ Pianist/Organist, or other music requested (you will be contacted by the Director of Music)

Specific Property Areas Needed (check all that apply) ____ Sanctuary ____ Great Hall

____ Kitchen ____ Youth Room ____ Classroom(s) (specify) _____

____ South Lawn/Deck _____ Parking Lot ____ Preschool/Playground ____ School Playground

Other comments or concerns: _____

_____

IMPORTANT! Scheduling priority is always awarded to church related events and activities.
Custodial service is required for all events. A $150 cleaning deposit will be required for all use unrelated to the mission of the church. Based upon the condition of building at end of event, a portion of the deposit may be refunded.

Signature of person making request: _____ Phone _____

This section for office use only

Recorded on calendar _____/_____/_____ Recorded on Building Use Data Base _____/_____/_____
Check staff members who need to sign off on this request: Property Manager _____ Custodian ____ Office _____
HeBrews Manager _____ Music Director _____ Nursery Director _____ Principal _____ Preschool Adm. _____

HeBrews Coffee Shop is available for groups meeting at Cross of Hope Church. The minimum sales requirement is $25 per hour; groups failing to attain this amount will be charged the balance due. Please make reservations at least 10 days in advance, in order for us to ensure adequate staffing and supplies. The HeBrews counters and equipment may not be used without HeBrews' staff present; however the seating area is available without staff. The HeBrews Manager will contact you upon approval of your event. Groups may utilize HeBrews for fundraising; although all drink revenue must go to the general building fund, any donated baked goods may be sold to benefit approved ministries within the church. In order to accommodate your request, please fill out the following information:

Number of people expected to attend _____ Number of coffee drinks expected _____

Specific hours of operation requested _____ am/pm to _____ am/pm ($25 per hour revenue required)

Nursery Request: To reserve nursery space, please provide the following information:
Number of children ages 0 through 4: ____ Number of children ages 5 through 11: ____
Number of adult caregivers to be present: _____
The Nursery is designed and equipped for babies, toddlers, and preschool children through age 4.
THERE MUST BE AT LEAST ONE ADULT PRESENT ANY TIME THE NURSERY IS IN USE.
Nursery use is NOT approved until our Nursery Manager has called you, discussed the details of your request, and confirmed that your request is approved.
If you have not heard from the Nursery Manager within 24 hours of completing this form and returning it to the church office on a week-day, please call the church office for assistance in reaching the Nursery Manager.

Sound System Request Where, which system If sanctuary, then av tech required

Where will you need a sound system? _____ Great Hall _____ Classroom

_____ Outside _____ Sanctuary (AV Tech required) Will you need a portable cd player? _____

Specify the time: ____ am/pm to ____ am/pm, and date(s) needed: _____/_____ to _____/_____

Rehearsal (required for complex sound/video set-ups) ___Yes ___No Date _____/_____/_____ time _____

Property Request Responsibility is of the requesting party to Set-up/take-down tables/chairs, Launder tablecloths Return the laundered tablecloths the following day after event

Number of chairs needed? _____ Number of round tables requested (Seat 8-10 each) _____

Number of rectangular tables requested (Seat 8-10 each) _____ Number of tablecloths requested _____

Playground Request

Preschool playground _____ Number of children expected _____ Number of adult supervisors _____

School Playground _____ Number of children expected _____ Number of adult supervisors _____