FIRST UNITED METHODIST CHURCH

310 N. MAIN STREET
MOCKSVILLE, NC 27028
(336) 751-2503

Request for Use of Church Facility

Request Form for use of: (Please check one of following)
Family Life Center:_____
Fellowship Building:_____

Please check one:

_____ Church Member _____Non-Member with Member Signing Also _____FUMC Church Group _____ Special Group

Date of Request:_____

Person(s) Making Request:_____
(name of Member and Non-Member if applicable)

Address: (Street/Apt. #)_____ City/Zip_____

Home Phone Number:_____ Work Phone Number:_____

Type of Activity For Request: (i.e. reception, anniversary, reunion, etc.) _____
_____
Caterer (if applicable)_____Phone:_____
Address:_____Approved:____ Not Approved:_____
(street) (city-zip)
Type of Entertainment being used if applicable. (Please be specific.) _____
_____Approved:____Not Approved:_____

Date and Time of Activity: (please include set-up time per "Rules and Regulations") _____

I have read the First United Methodist Church Policy for Facility Use and agree to the terms and conditions included therein. I have also read the 'fees' schedule on the reverse side and marked all areas I will be using, and for which I am obligated to make payment.

Fees are payable through the church office at the time the request is made, as set forth in the Rules and Regulations Policy under the heading "Fees". Once the request has been approved and fees paid, the fees are non-refundable.

Signature:_____ Date:_____
Signature:_____ Date:_____

For Office Use Only

Request Approved:_____ Date:_____ By:_____