

# ROOM REQUEST FORM

Please complete entire form for each event

*If equipment is needed for this event, please fill out St. Paul Audio-Visual Equipment Request form too.*

Today's Date \_\_\_\_\_  
Event Name \_\_\_\_\_  
Date(s) of Event \_\_\_\_\_  
Start Time of Event \_\_\_\_\_ End Time of Event \_\_\_\_\_  
Number of People Expected at Event \_\_\_\_\_  
Organization Responsible for Event \_\_\_\_\_  
Contact Person for Event \_\_\_\_\_  
Contact Person Telephone Number \_\_\_\_\_

**If this is a St. Paul ministry event for youth ages 0-18, who are the two trained ESGC (Ensuring the Safety of God's Children) representatives who will be present? (This is a mandatory requirement.)**

\_\_\_\_\_

Room(s) Requested for Event (please check all that apply)

Sanctuary	_____	Kitchen	_____
Nursery	_____	Fellowship Hall	_____
Chapel	_____	Youth Room	_____
Choir Room	_____	Computer Room	_____
Preschool (3 yr old)	_____	Pre-Kindergarten Room	_____
ESSE Room	_____	ESSE Lunch Room	_____
		(room next to Fellowship Hall)	

If answering "no" to any of the following questions, please contact Kimberly in the church office, 668-5953, Monday-Friday, between 8 a.m. & 4 p.m. at least one week before event to arrange for instruction.

Do you know where to find light switches for the areas (including hallways) you are reserving? \_\_\_\_\_

Are you aware of the appropriate doors to enter/exit and lock up for your event? \_\_\_\_\_

Do you know where the outside trash receptacle (and key) is located? \_\_\_\_\_

**Important Notice: Organizations must remove trash, close windows, turn out lights, and lock appropriate doors. Please do not leave any leftover food in either the refrigerator or**

*Each group is responsible for its own setup and take down unless the "Room Setup Form" on the reverse side of this form is completed.*

*Please leave completed form in "Kimberly Olson" mail slot outside of the church office. Contacts will be made if a conflict arises.*

# ROOM SETUP FORM

Tables \_\_\_\_\_ Setup Needed By \_\_\_\_\_  
(Date/Time)

Chairs \_\_\_\_\_ Can Take Down After \_\_\_\_\_  
(Date/Time)

**PLEASE DRAW PICTURE OF YOUR DESIRED SETUP BELOW:**

(Please be as specific as possible)