



HAWKER UNITED CHURCH OF CHRIST
 1617 N. Longview Street
 Beavercreek, OH 45432
 Ph:937-426-0973
 Email: office@hawkerucc.org Web Site: Hawkerucc.org

For Church Office Use Only
Date Received: _____
Date Approved: _____

REQUEST FOR USE OF CHURCH FACILITIES

Event Description: _____ Desired Dates: from ____/____/____
 Organization Name: _____ to ____/____/____
 Organization Address: _____ Desired Times: from _____ A.M P.M.
 _____ to _____ A.M P.M.
 ACTUAL TIME EVENT STARTS: _____ A.M P.M.

Contact (Reserving) Person: _____ Contact Phone Number: _____

Category 1: Hawker Events Hawker Groups Active Hawker Member
Category 2: Inactive Members Non-member Sponsored by an Active Member Non-members
 Active Member Sponsored Organizations All Other Organizations

Sponsor Name: _____ **Phone Number:** _____

Sponsor Address: _____

Estimated Number of Attendees: Adults: _____ Children: _____ Total: _____

Facilities Required:

Sanctuary(100) Chapel(102) Fellowship Hall with Kitchen(111) Small Kitchen(106)
 North Entrance(101) Narthex(107) Conference Room 115A Music Room(109) Kindergarten(207)
 Pre-school Classroom(203) 5th – 6th Classroom(205-206) Picnic Shelter Other _____

Wedding Package - Category 1 / Category 2 Funeral Package - Category 1 / Category 2

<u>Fee(s) for (per Facilities Use Policy)</u>	<u>Fee Amount</u>	<u>Deposit Amount/Date</u>
_____	_____	_____
_____	_____	_____
TOTAL	_____	_____

Pastor Approval Required for Weddings. Is approval obtained? Yes No **DATE:** _____

Council Approval Required? Yes No Approval obtained? Yes No **DATE:** _____

Room Set Up Required? Yes No (If yes, please attach the setup layout additional fee may apply)

I have received a copy of the appropriate sections of the Hawker Facilities Use Policy Handbook and I agree to follow all policy rules.

_____ (Signature)

_____ (Date)