

TODAY'S DATE: \_\_\_\_\_ DAY & DATE of EVENT: \_\_\_\_\_

## Activity Information/Request for Building Use

Event Starting Time: \_\_\_\_\_ Event Ending Time: \_\_\_\_\_

Activity/Event: \_\_\_\_\_ Cost (deposit): \$ \_\_\_\_\_ Due by \_\_\_\_\_

Ministry: \_\_\_\_\_ Number of people expected to attend: \_\_\_\_\_

\*Minister in charge: \_\_\_\_\_ Reservations needed?  No  Yes by \_\_\_\_\_

\*Leader/person in charge: \_\_\_\_\_ Telephone: \_\_\_\_\_

Location (building/room/offsite): \_\_\_\_\_ Time you need access? \_\_\_\_\_

Will you need a key to the building?  No  Yes (Contact your Staff Liaison)

RESOURCES NEEDED (check all that apply):

YES NO

KITCHEN (list supplies needed) \_\_\_\_\_

Name of person in charge of food preparation \_\_\_\_\_

(Notify Jessi Numbers 443.677.4613 at least two weeks prior to the event)

MULTI MEDIA EQUIPMENT (Sound, Projection... May Not Be Available for this Event) \_\_\_\_\_

(Notify Adam Lewandowski [adaml@oakgrovebaptist.com](mailto:adaml@oakgrovebaptist.com) at least two weeks prior to the event)

TABLES AND/OR CHAIRS \_\_\_\_\_

CHILDCARE / NURSERY (Notify Trey Wooton 410.838.9898 EXT 228 at least 2 weeks prior to event)

TRANSPORTATION \*\* (Big Bus / Small Bus / Van / Personal Vehicles) \_\_\_\_\_

LIST DRIVER for bus or van: \_\_\_\_\_

(Bus/van drivers: notify Richard Weih 410.838.9898 EXT 244 at least two weeks prior that you are driver)

PERMISSION FORM \_\_\_\_\_

PUBLICITY REQUESTED (Bulletin / Announcements / Slide / Website) Dates & Quantity req.

SECURITY-SAFETY SUPPORT / PARKING TEAM SUPPORT / MEDICAL TEAM SUPPORT (circle)

\* Groups using the facilities are responsible for ALL set-up and clean-up:  clean bathrooms  all trash in dumpster  
Facilities should be restored to the formation that is necessary for the next regularly scheduled program. This should be done immediately at the end of your program. \*\* Groups using the bus/van are responsible for cleaning the interior and returning vehicle(s) filled with gasoline.

SIGNATURE OF PERSON MAKING REQUEST: \_\_\_\_\_

Staff Entered on Calendar: \_\_\_\_\_ on this date: \_\_\_\_\_

Request Approved By Staff: \_\_\_\_\_ on this date: \_\_\_\_\_

2<sup>nd</sup> STAFF APPROVAL \_\_\_\_\_

revised 09/2016