

Calvary Baptist Church
Facilities Room Request/Set-up Form

Requested By: Ministry _____

Name _____

Contact Number _____

Cell Number _____

Email Address _____

Date of Activity: _____ # of participants: _____

Start Time: _____ AM or PM (please circle)

End Time: _____ AM or PM (please circle)

Please indicate which room(s) will be used:

_____ Mark

_____ Matthew

_____ Ruth

_____ Mary

_____ Pauline

_____ Upper

_____ Martha

_____ David

_____ Genesis

_____ John

_____ Chapel

_____ Sanctuary

_____ Mahalia Jackson

Equipment Request:

_____ Overhead Projector

_____ TV/VCR

_____ TV/DVD

_____ Podium

_____ Microphone # _____

_____ Chairs # _____

_____ Tables # _____

_____ Other: _____

If your event requires food, please attach a Food Request Form with this form.

For Office Use Only

_____ Facilities _____ Kitchen _____ Office

Please return this form to the office no later than one week before your scheduled event.

Mahalia Jackson Fellowship Hall
(sketch set-up below)

MLK ENTRANCE

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KITCHEN