

Social Event Request Form

Request For Use Of: Church Fellowship Hall Kitchen Rooms

Today's Date _____

Church Member Making Request _____

Exact date and time to be used: Date: _____ Time: _____

Purpose for Request: _____

Persons/Family to use facility: _____

Approximate number of people: _____

Special Request/ Needs: _____

Request Contact Person Name _____

Address _____

Phone _____

2nd Contact Person Name _____

Address _____

Phone _____

Church Contact Person For Event: Name _____

Phone _____

Additional Information _____

TURN INTO GARY/BETTY BUTLER IN PERSON WHEN COMPLETE