

Facility Use Request Form

*Form must be turned in to our Office Administrator for approval at least 1 week prior to use.
Please email or place in Debbie's Mailbox. (Located in the room beside her office)*

Name of person requesting to the facility: _____

Which facility are you requesting to use? _____

For what purpose do you need to use this facility? (ie: Bible Study, Child's Birthday Party, etc.)

Date(s) needed: _____

Approximately how many people will be gathering in this facility? _____

Please initial beside each statement below.

1. I will wipe down the space I will be using prior to use and after the use _____
2. I will take the trash out after use _____
3. If restrooms were used, I will make sure all of the toilets are flushed _____
4. I will sweep the area of use _____
5. If needed, I will mop the area of use _____
6. If I use the last of a cleaning supply item, I will complete the Order Request Form and submit to the Office Administrator. _____

Please use the cleaning supplies provided for you in the cabinet.....

- Clorox Wipes: Tables, chairs, surfaces, countertops, etc.
- Lysol Spray: Toilets and sinks
- Trashbags: Replace trash bag in can with a new trash bag

Please sign and date the form and submit to the Office Administrator for approval.

Signature: _____ Date: _____

Office Use Only

_____ Has permission _____ Does not have permission

Office Administrator's Signature

Date