

**SACKVILLE UNITED CHURCH
FACILITY USE REQUEST FORM**

Please return completed form to the church office as far in advance of date requested as possible to confirm your reservation

Name of Organization: _____

Contact Person's Name: _____

Mailing Address: _____ **Phone #:** _____

Email: _____

Date(s) Requested: _____

If recurring – Start date: _____ End date: _____

Time of Day - Begin: _____ **End:** _____

Event Description: _____

Anticipated Number of Participants: _____

Will a participant fee be charged? YES NO If yes, please explain:

Will food or drink be offered? YES NO

Space Requested:

- | | |
|---|---|
| <input type="checkbox"/> Church Sanctuary | <input type="checkbox"/> Meeting rooms (upstairs) |
| <input type="checkbox"/> Godly Play area (upstairs) | <input type="checkbox"/> Kitchenette (for coffee or tea preparation only) |
| <input type="checkbox"/> Quiet room | |

Equipment Required:

- | | |
|--|---|
| <input type="checkbox"/> Chairs – Quantity: _____ | <input type="checkbox"/> Tables – Quantity: _____ |
| <input type="checkbox"/> Microphones – Quantity: _____ | <input type="checkbox"/> Overhead projector |
| <input type="checkbox"/> Mic stands – Quantity: _____ | <input type="checkbox"/> Mixing Board |

See reverse for insurance and donation information

For office use only:

Approved: YES___ NO___ Date: _____

Insurance Certificate Received: YES___ NO___ WAIVED___

Signature of church representative: _____

Groups or organizations must provide a certificate of insurance indicating that they have liability insurance coverage. Sackville United Church must be named as an additional insured on the certificate of insurance. The Church Executive may waive these requirements if the nature of the group or organization does not permit it to obtain such insurance.

Sackville United Church provides its space for non-church functions as a service to the community. Transformative moments happen here and are happy to receive donations.

Sackville United Church
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September 30, 2015