

CHURCH OF THE MASTER
24 N GROVE ST. WESTERVILLE, OH 43081
(614) 882-2153
facilities@chmaster.org

**COMMUNITY MEMBER
FACILITIES USE APPLICATION FORM**
Please list one event per form and please print clearly
Submit form to Facilities Manager in office mailbox or via email

Event Date (1st Choice): _____ Event Date (2nd Choice): _____

Event Name and Description:

Estimated Number of Attendees: _____

Requestor Name: _____

Address: _____

Email Address: _____

Phone: _____

Event Host Name: _____

Address: _____

Email Address: _____

Phone: _____

Set-up start time: _____ Clean-up end time: _____

Event Start Time: _____ **Event End Time:** _____

Requested Space: NOTE: Fees are for use up to four hours \$25 for each additional hour

(\$250) Sanctuary _____ (\$75) Sound System _____ (\$75) Video System _____

(\$50) Gathering Space _____ (\$50) Nursery Room _____ (\$50) Classroom(specify) _____

(\$50) Chapel Room _____ (\$50)Wagoner-Hursh Room _____

(\$150)Fellowship Hall _____ (\$100) Kitchen (cooking) _____ (\$100) Gym _____

Number of Tables: 8 ft long (30 available) _____ or 5 ft round (10 available) _____

Number of Chairs: (240 available) _____

Please include a Set Up Form for desired arrangement of tables and chairs

Please note items and time for any outside deliveries:

Dates are not considered reserved until approved by the Trustees/Facilities Manager and no event will be scheduled until all required deposits have been received.

Church needs and activities have first priority including unexpected events (i.e. funerals) which may cause cancellation or rescheduling of requested date.

Requestor Signature: _____ Date of Application _____