

Application for Single Event or Short Term Use of Facility

First United Methodist Church
1771 W. Harvard Ave.
Roseburg, Oregon 97471
(541) 672-1629/ admin@fumcroseburg.org

Return this completed form to the church office at least 5 business days before the program begins. The program is not placed on the calendar until application is approved and payment received.

Name of Organization or Program _____

Contact Person (Responsible Party): _____

Daytime Phone: _____ Evening Phone: _____

Mobile Phone: _____ Email: _____

How else might we contact you in case of emergency? _____

Room(s) requested: _____

Day(s) of the week requested: M Tu W Th F Sa Su

Start date: _____ End date: _____

From: _____ AM/PM To: _____ AM/PM

At what time do you need access to the room? _____

Brief description of program: _____

Kitchen needed? Yes (a fee may apply) No

If you need the kitchen, explain why: _____

Custodial services? (Required for Friday evening or weekend meetings)

Yes (a fee may apply) No

I have read and understand the expectations pertaining to the use of church facilities and equipment. I have also read and initialed the church's Safe Sanctuary Policy and agree that I and all participants will comply with those practices. I understand that all fees are payable in advance. _____ (initials)

Office Use Only

Approved? Yes No

Office Manager _____

Date _____

EVENT SET-UP

Organization _____ Event _____

Date(s) _____ Time(s) _____

Room(s) _____ Number of Participants _____

Contact Person (Name) _____ Phone number(s) _____



Describe the set-up you would like and return this completed form to the church office at least five (5) business days prior to the event. For large numbers of participants, the Custodian will make adjustments as necessary.