



Richmond Presbyterian Church

FACILITY USE REQUEST FORM

Complete all sections of the form. A Use of Facilities designate will contact you regarding space availability and fees. **Completion of the Facility Use Request Form and offer of a Quote does not guarantee or approve use of the facility.**

SEND COMPLETED FORM TO: richpres.facilities@gmail.com

Group Name: _____

Contact Name: _____ Title: _____

Contact Phone Number: _____ Email: _____

Contact Address: _____

Event Name: _____

Event Purpose: _____

Room(s) Requested: _____

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

**Include the Set Up Time and Take Down Time in your request*

Is this a recurring rental? YES NO If yes, Weekly? YES NO Monthly? YES NO

Comment: _____

Number of people expected to attend the Event: _____ Anyone under the age of 19 years? YES NO

How many under 19 years? _____ Ages? _____

Number of chairs required: _____ Number of tables required: _____

Will food be served? YES NO Specify: _____

Will coffee/tea/beverages be served? YES NO Specify: _____

Will alcohol be served? YES NO Specify: _____

Check below the equipment that will be required for your event:

___ Piano ___ Organ ___ Music Stands (How many?) _____

___ Audio / Visual System ___ Public Address System

Will your equipment be used? YES NO Specify: _____

Does your group have liability insurance? _____

Registered Charity Non Profit Number: _____

Date: _____ Completed by: _____