

KBBC Calendar Request Form

Date Of Request _____

Name Of Event _____

Contact Info

Name of Person Making Request _____ Telephone Number _____

Department _____ Class _____

Event Details

Date Of Event _____ Location Of Event _____

Time Event Starts _____ Ends _____ Setup/Cleanup Time Required Before _____ hrs
After _____ hrs

Cost Per Person _____ How Many People Do You Expect To Attend _____

Facilities/Equipment Required

- | | |
|--|--|
| <input type="checkbox"/> Pavilion | <input type="checkbox"/> Main Bldg Classroom _____ |
| <input type="checkbox"/> FLC - Kitchen (to include oven/stove)
Will you be cooking Yes _____ No _____ | <input type="checkbox"/> FLC - Stage |
| <input type="checkbox"/> FLC - Gym | <input type="checkbox"/> FLC - Classroom _____ |
| <input type="checkbox"/> FLC - Kernan Kaffe | <input type="checkbox"/> Softball Fields |
| | <input type="checkbox"/> Other: _____ |

- * Cleanup, trash and food removal are the responsibility of the class/person hosting the event.
- * If you require a room setup a certain way you must include a diagram.

Supplies or misc items/support

If Off Site please check anything you need to be provided from the church

- | | |
|--|--|
| <input type="checkbox"/> Tablecloths: (how many) _____ | <input type="checkbox"/> Audio Visual/Stereo Equipment (pls specify) |
| <input type="checkbox"/> Other: _____
<i>Please Explain</i> | <input type="checkbox"/> Sound System |
| | <input type="checkbox"/> Music player |
| | <input type="checkbox"/> Video Projector/Screen |

Transportation

Approx. Number of people: ____ (must be more than 15 to use a bus) Since Transportation is contracted, the request must be in nlt 45 days before the event. Cost is approx \$10 per person.

Childcare

***Childcare MUST be coordinated through Yolanda Hall.** Children are watched in the preschool area and it is your responsibility to make sure you can get into the preschool area and to make sure the alarm is turned off in the main building. Childcare workers are not able to turn the alarm off.

We Need Childcare Yes No Yes We Have/Will Contact Yolanda Hall

Please Describe Your Event In Detail:
(Continue on Back If Needed)

I have received and agree to abide by the KBBC Building Use Policies _____

Request Is Not Added To Church Calendar until reviewed by staff.

Signature of Requestor

Date Staff Approved __/__/____

*It is your responsibility to pick up a key from the church office before your event.

*Please turn this form into the church office well in advance of your event/activity to ensure enough time to promote, reserve buses and facilities, etc. FAX Number 904-641-1777