



Church Use Request Form

Contact Name: _____

Address: _____

Phone: _____

Email _____

Name of Group _____

Check room being requested for use:

- | | | | |
|--------------------------|-----------------------------|--------------------------|-----------------------------|
| <input type="checkbox"/> | Fellowship Hall | <input type="checkbox"/> | Kitchen |
| <input type="checkbox"/> | Multi-purpose Room | <input type="checkbox"/> | 1 st Floor Annex |
| <input type="checkbox"/> | 2 nd Floor Annex | <input type="checkbox"/> | Friendship Room |

Day(s): M T W Th F Sat Sun

Date(s): _____ Time: _____

What will the space be used for?

DEPOSIT DUE: **\$40.00** Date Paid: _____

Cash: _____ Check#: _____

USAGE FEE DUE: **\$75.00** Date Paid: _____

(no fee for MUMC members)

Cash: _____ Check#: _____

Deposit Due Now. Usage fee due
When hall is checked after usage and found to be cleaned up, Deposit will be returned.

Trustees Representative approval:

Sign *Date*