

Building Use/ Activity Location Form

Event: _____

Circle One: On-site Off-site

Building & Room #: _____

Start Date/End Date: _____

Start Time/End Time: _____

Circle One: One Time Event Weekly Event Monthly Event

Contact Person (Requestor): _____

Approximate Number of People Involved: _____

Phone #: _____

E-Mail Address: _____

*Availability is subject to approval by the church office. You will receive an e-mail for confirmation.

*If you have any changes, please contact the church office so we can update the bulletin weekly.

Please return this form to the Calvary Christian Church Office.
Phone 293-1700; FAX 293-6191; info@calvarychristianchurch.org

~For office use only~

Date of Approval: _____ Signature: _____