

***Williamsburg Baptist Church***  
**APPLICATION FOR USE OF FACILITIES**

Name of Group \_\_\_\_\_

Activity Purpose \_\_\_\_\_

Space Desired \_\_\_\_\_

Date(s) Needed \_\_\_\_\_ Time of Event \_\_\_\_\_

Starting Time (Begin Set Up) \_\_\_\_\_ Ending Time (After Breakdown) \_\_\_\_\_

Will Food be Served? \_\_\_\_\_ Number of Participants \_\_\_\_\_

**A diagram of any set up or movement of furniture should be provided on reverse.**

Primary Contact Person \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Secondary Contact Person \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

**Additional information that may be helpful to the Trustees and Administration Council in its evaluation should be provided on the back of this form.**

\_\_\_\_\_  
Signature of Primary Contact Person                      Date

**FOR CHURCH USE ONLY**

**ACTION TAKEN:** \_\_\_ Approved as requested    \_\_\_ Approved with conditions    \_\_\_ Not Approved

**Conditions:**

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Date**