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Osceola United Methodist Church

431 N. Beech Rd., Osceola, IN 46561

Building Use Request Form

All requests to use the OUMC facility must be approved by the church staff and the facilities manager.
Completion of this form does not guarantee use of the building.
You will be informed as soon as possible if we can accommodate your request.

First Time Event/User Only:

What is your current relationship with OUMC?
How did you learn about OUMC?

Name of Event/Group: _____

Principle activity of the group while using the facility: _____

Submission Date: _____

Person taking responsibility for the group while using the facility must be present for the entire event.

Event Coordinator: _____

Address: _____

Email: _____

Work Phone: _____

Home Phone: _____

Note: All groups must re-submit their request for room use every year by August 31.

Event Date: _____ **Start Time:** _____ am / pm **End Time:** _____ am / pm

(If this is an ongoing group, indicate day of the week or day of the month).

(not to exceed beyond 10:00 PM)

Set-Up Date: _____ **Start Time:** _____ am / pm **End Time:** _____ am / pm

Room Request: Sanctuary Fellowship Hall Parlor Reception Room Kitchen
 Middle School Room Youth Room Room 19 All Church Pavilion/Firepit Ball Diamond

Number of people attending event: _____

Note: OUMC does not have persons responsible for set-up or tear down/clean up. Nor do we provide refreshments or consumable supplies such as chart paper, copies, chalk, markers, coffee, cups, plates, napkins etc.

That is the responsibility of your group.

I have read the BUILDING USE POLICIES of OUMC and have shared them with the person listed above as responsible for the group while at OUMC and we will organize our use of these facilities to conform to these policies.

Signed: _____ **Date:** _____

ROOM USE IS SUBJECT TO CHANGE IN THE EVENT OF AN UNTIMELY FUNERAL.

Office Use Only

Request approved by _____ Room(s) assigned _____

Applicant notified _____ **\$100 DEPOSIT RECEIVED BY** _____ Deposit Refunded _____

Notes: _____