

**FACILITY  
REQUEST  
FIRST  
CHRISTIAN  
CHURCH**

3209 Whitesburg Drive  
Huntsville, AL 35802

Phone: 256-881-0150  
Fax: 256-881-0181

Email: secretary@fcc-hsv.org

*A contribution for use of the facility, which pays for extra janitorial expenses, is appreciated. A separate list of charges may be provided, if warranted, and fees must be paid in advance.*

*If groups are unable to cooperate with the staff and other groups using the building, it is understood that staff may ask group to leave.*

*Persons who sign this request are familiar with the space limitations of FCC and the need to be good caretakers of the facility. If room is not left in satisfactory condition, extra fees for janitorial services will be charged. Any questions about use of space shall be addressed to the senior pastor or property manager. **Church Office should be contacted if a meeting date is cancelled.***

*Certain requests involving insurance coverage must be approved by the property manager. In certain cases, a Liability Waiver and an Insurance Certificate may be requested for our file.*

*Children MUST BE under adult supervision AT ALL TIMES.*

*There will be no secretarial/ answering service support provided by FCC.*

DATE OF APPLICATION

DATE OF EVENT  START TIME

NAME OF REQUESTING GROUP/INDIVIDUAL:

\_\_\_\_\_

EVENT \_\_\_\_\_  
(recurring events must be renewed in January)

CHECK WHICH ROOM(S) REQUIRED:

- |  |   |
|--|---|
| <input type="checkbox"/> SANCTUARY (400)                     | <input type="checkbox"/> FAMILY SERVICES AREA (58)                        |
| <input type="checkbox"/> PARLOR (25) (3)                     | <input type="checkbox"/> McMAINS ( <i>Fellowship Hall/Gym</i> ) (200)(20) |
| <input type="checkbox"/> PARLOR KITCHEN                      | <b>DOWNSTAIRS CLASSROOMS:</b>   |
| <input type="checkbox"/> CYF ( <i>upstairs</i> ) (20)(6)     | <input type="checkbox"/> 202 <i>Parenting</i> (16)(2)                     |
| <input type="checkbox"/> CHI RHO ( <i>upstairs</i> ) (20)(6) | <input type="checkbox"/> 204 <i>Growing in Faith Together</i> (30)(4)     |
| <input type="checkbox"/> GARDEN RM. (30)(6)                  | <input type="checkbox"/> 209 <i>New Testament</i> (25)(2)                 |
| <input type="checkbox"/> KITCHEN                             | <input type="checkbox"/> 211 <i>Growing Christians</i> (25)(4)            |
| <input type="checkbox"/> LIBRARY (20)(2)                     | <input type="checkbox"/> OFFICE CONFERENCE ROOM (10)(1)                   |
| <input type="checkbox"/> OTHER ( <i>Name</i> ) _____         |   |

EQUIPMENT REQUIRED:

TABLES:

Diagram of layout:

NO. ROUND:

NO. LONG:

CHAIRS:

OTHER \_\_\_\_\_

Please indicate location of room door

Person (s) responsible for room set up/clean up:

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL: \_\_\_\_\_

FACILITIES NEEDED FROM \_\_\_\_\_ AM/PM TO \_\_\_\_\_ AM/PM

APPROX. # ATTENDANCE \_\_\_\_\_ CHILD CARE? \_\_\_\_\_  
(IF YES, COMPLETE REVERSE)

Name of person responsible for proper use and care of facilities and who will pay for any church items broken or damaged during the event. An issued key for one time events must be returned after the event and not passed on to another person.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

(E-MAIL) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**NO SMOKING OR ALCOHOLIC BEVERAGES ALLOWED ON CHURCH PREMISES. FOOD & BEVERAGES ARE NOT PERMITTED IN THE SANCTUARY.**

**PLEASE RETURN THIS FORM ATTENTION: Office Administrator**

AS OF 21 October 2009

STAFF APPROVAL

DATE

Contribution received?

yes  no

# CHILD CARE REQUEST

FIRST CHRISTIAN CHURCH

DATE OF APPLICATION \_\_\_\_\_ DATE OF EVENT \_\_\_\_\_

NAME OF GROUP \_\_\_\_\_

## PLEASE NOTE:

1. Childcare services are only provided for official church-sponsored functions.
2. There will be a minimum of 2 attendants, for a minimum of 2 hours. The minimum fee per attendant is due even if no children are placed in the nursery.
3. If no children arrive in child care within the first half-hour of the scheduled start time, the attendant will be released, but must be paid for two hours.
4. Your cost is \$12.00 per attendant per hour.
5. First Christian Church does not automatically assume the cost of nursery care. The nursery fee is payable to First Christian Church, mark the check "Nursery" and include a description and date of the event.

Who is responsible for payment for the child care? (Church, group, individual)

\_\_\_\_\_

The time child care is needed: From \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

Person to contact \_\_\_\_\_ Phone \_\_\_\_\_  
(you will be contacted by our child care coordinator)

Total number of children expected: \_\_\_\_\_

Ages: \_\_\_\_\_ 1-6 months  
\_\_\_\_\_ 7-12 months  
\_\_\_\_\_ 13-18 months  
\_\_\_\_\_ 19-30 months  
\_\_\_\_\_ 2-1/2 to 4 years  
\_\_\_\_\_ 5-9 years

Number of attendants needed will be determined by number of children and distribution.

Will a meal be served? \_\_\_\_\_ No \_\_\_\_\_ Yes

If "Yes", who will provide the meal? \_\_\_\_\_

*\*Note: Facility request approval is contingent upon child care availability.*