

FACILITY USE REQUEST

Sugaw Creek Presbyterian Church
101 Sugar Creek Rd. West Charlotte, North Carolina 28213
Office Phone: 704.596.4466 | Office Email: office@sugawcreek.org

A NOTE TO OUR FRIENDS WHO MEET IN OUR BUILDING

We are delighted to have the church used by a variety of community groups. Hospitality is central to the teachings of Jesus and reflects the human concerns He fostered. However, this additional use of our facility places increased demands upon our facility and requires substantial coordination on the part of our church. We want to be good hosts and ask that you treat this building as you would your own home.

PLEASE REMEMBER:

- To meet in assigned room(s) only
- To show reasonable care for meeting space and furnishings
- To clean up any spills or trash from your group- this includes bathrooms
- To supervise children at all times. Do not leave them wandering through the building
- No smoking, drugs or alcohol are permitted in the building

***Additional forms apply for wedding use ** All arrangements require approval by the church.**

Date of Application: _____ Requesting Group: _____
Type of Group: _____ Non-Profit/Community Service _____ Church Related _____ Government
_____ Educational/Recreational/Cultural _____ Business _____ Other
Contact Person: _____ Phone: _____
Email: _____ Cell: _____

EVENT DETAILS

Event Title: _____
Date(s) of Meeting _____
DAY: _____ SET UP TIME: _____ START TIME: _____ END TIME: _____
DAY: _____ SET UP TIME: _____ START TIME: _____ END TIME: _____
DAY: _____ SET UP TIME: _____ START TIME: _____ END TIME: _____
DAY: _____ SET UP TIME: _____ START TIME: _____ END TIME: _____
DAY: _____ SET UP TIME: _____ START TIME: _____ END TIME: _____
General Purpose of Meeting: _____

SPACE REQUESTED

_____ Sanctuary
_____ Fellowship Hall
_____ Kitchen
_____ Classroom
_____ Other: _____

EQUIPMENT

Item Quantity
Chairs: _____
Tables (Round): _____
Tables (Long): _____
Podium: _____

Item Quantity
Microphone: _____

**If you need additional items or a specific room layout please attach additional information or diagram*

FOR OFFICE USE ONLY (DO NOT FILL IN BELOW LINE)

Usage Fee: _____ Deposit Required: _____ Donation: _____
Additional Notes: _____

Approved By: _____ Date Approved: _____