



FACILITY & EQUIPMENT USE FORM

This form is to be used for requesting set-up for events. Please request a NFC Facility & Equipment Policy for policies and further information.

Date Submitted: _____

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Date of Event _____ Type of Event One-Time Recurring Every _____

Name of Event _____

Sponsoring Group _____

Billing address _____

Person in Charge _____ (Tel No) _____

Event Start Time _____ am/pm End Time _____ am/pm Number of People Attending _____

Times facility/room will need to be unlocked and will be used (decorating, rehearsal, prior to event, etc.):

1) Date _____ Time _____ am/pm Purpose _____

2) Date _____ Time _____ am/pm Purpose _____

3) Date _____ Time _____ am/pm Purpose _____

Room(s) Being Used _____ Off-Grounds

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Equipment needed in room (please use back of form if needed to draw layout or add special instructions):

- Podium Overhead Projector TV/DVD Easel
- White Board TV/VCR Screen
- Other _____
- Other _____

- Round Tables (# _____) With chairs (seat 8 each)
- Rectangle Tables (# _____) With chairs (seat 10 each)
- Chairs Only (# _____) Circle Half-Circle Classroom Style Other _____
- Other _____ Other _____

Special equipment requested:

- Wheel chair lift (Ferdinand Hall only)
- Sound system. Location Ferdinand Hall Sanctuary Forum Gym
 - 1-2 microphones with set volume (no operator on duty) Multiple microphones (operator required)
 - Name of sound/video technician _____
- Kitchen use: Name of Kitchen supervisor _____

Name of person to launder cloths _____

- Equipment to be used: Dishwasher Silverware Dishes Tablecloths ___ rounds/ ___ recs
- Ovens Refrigerator Table service (creamer/salt/pepper/sugar bowls) Coffee service _____
 - Other _____ Other _____

OFFICE USE

Date Rec'd: _____ By: _____ Date approved for Facility Calendar: _____

ROOM LAYOUT & DRAWING

(Be as detailed as possible)

SPECIAL INSTRUCTIONS

SIGNATURE

I have read, understand and agree to abide by the NFC Facility Use Policies. I understand that I assume all risks for loss, damage, liability, injury, cost, or expense that may arise during, or be caused in any way by my use or occupancy of

Nampa First Church of the Nazarene facilities. I further agree to hold NFC and/or its employees and representatives free and harmless from any loss, claims and liability, or damages and/or injuries to persons or property that in any way may occur as a result of my use or occupancy. As the undersigned, I hereby certify that I will be personally responsible for any damages. My signature certifies that all information on this application is true. I understand and agree that any misstatement or omission of material fact herein may cause forfeiture of my deposits.

Printed Name: _____ Signature: _____ Date _____

