Chelsea First United Methodist Church Building Use Application

Date(s) Needed		Date of Application				
If an ongoing event, list the day(s) of	of the week:					
Monday Tuesday Wed	nesday	Thursday	_ Friday	Saturday	Sunday	
If an ongoing event, please indicate	which week	(s) of the mont	h:			
Every Week1 st Week	2 nd Week	3 rd Week_	4 th V	Veek5 ^{ti}	^h Week	
Name of Organization/Group			т	ype: Profit	Non-Profit	
EVENT:				Is this a church Activity?		
If you would like it posted in the Path I	Finder (Church	n events only) or	on the webs	ite, attach or en	nail your information.	
Contact Person:			Pł	Phone:		
Address:			E	Email:		
Room/Area of the church required:						
Lower Level Conference Room		oom all		*Kitchen		
Chapel	Library	uli		Class room #		
Other rooms or areas: *Note: A paid Kitchen Supervisor se	elected by th		ired to be c	on the premises	s during the time work	
Is Event Off Site ? Where E	vent will be	held:				
Deposit Received (\$100.00) Yes	No	Date Receive	ed:		Not needed	
(Deposit must be received 1 month p	rior to event	, your deposit w	ill be return	ed within a we	ek after your event)	
I have read and do fully understand	l the Building	g Use Policy of t	he Chelsea	First United M	ethodist Church	
Signature	Date					

Kitchen Equipment Needs

If you are reserving the Kitchen, please Committee contact information in orde	•	•
If an outside caterer is being used, pleas	se list their name and phone number	•
Refrigerator Storage - dates nee	ded (other than event day):	
Food set-up traying	Ice machine	Complete food preparation
Dishwasher and/or triple sink	Table service/glasses	
Warming ovens	Stove/oven/fryer	
Grams Hall		
Coffee Service		
boardroom style (chairs around l	arge rectangular table# of c	hairs needed (estimated)
small group style (chairs around	circular tables) # of tables needed _	# of chairs/table
traditional classroom style (head	table with rows of chairs facing table	e)
Estimated # of chairs needed	Preference: strait line or arc a	rrangement? (circle one)
OTHER: (Please write on a separat	e sheet of paper and attach diagram	of how you need the room set-up.)
Classroom or other Room Set-Up & Fui	rniture Needed:	
boardroom style (chairs around l	arge rectangular table # of c	hairs needed (estimated)
small group style (chairs around	circular tables) # of tables needed _	# of chairs/table
Informal circle style (chairs in a c	ircle around low, small coffee table	# of chairs needed
traditional classroom style (head	table with rows of chairs facing table	e)
Estimated # of chairs needed	Preference: strait line or arc a	irrangement? (circle one)
OTHER: (Please write on a separat	e sheet of paper and attach diagram	of how you need the room set-up.)
Equipment/Materials Needed:		
VCR/monitor, & remote	audio tape/CD pl	ayer
DVD, monitor & remote	newsprint pad &	markers
white/chalk board & markers/ch	nalk overhead project	cor
internet accessibility) computer	. monitor & connection	