

Date Submitted: \_\_\_\_/\_\_\_\_/\_\_\_\_

Date Entered: \_\_\_\_/\_\_\_\_/\_\_\_\_

# First Farragut UMC

## Facility Usage Request/Ministry Planning Information

- Please email [admin@ffumc.org](mailto:admin@ffumc.org) or call 865-966-8430 to check availability before submitting a request for your meeting(s), program(s), or event(s).
- Submit this form and you will be notified after your request has been reviewed. Email completed form to [admin@ffumc.org](mailto:admin@ffumc.org), fax completed form to 865-675-4435, or drop it off during church office hours Monday-Thursday from 9 a.m. to 2 p.m.
- We may require insurance information and/or a signed waiver.
- If kitchen will be used, complete page 2 (or backside of form).

### Additional Requirements:

1. Following the event, the area(s) used must be restored and as clean or cleaner than you found them. Please ask for location of cleaning items which can be used. **All garbage must be removed and placed inside the dumpster beside building.** Who, by name, is responsible to ensure the area(s) have been cleaned and restored? Name and contact information of individual:

\_\_\_\_\_

2. For security of your group members and those in the building, **you must have a representative from your group at the front entrance to let people in for your event.** Please **do not leave children unattended** or let them roam around building without an adult.

**\*\*\*\*The main entrance doors must remain locked during your event.**

Name of meeting/program/event: _____					
Requested room: _____	Second choice: _____				
Reserve Date From: ____/____/____	Reserve Date To: ____/____/____				
<b>Event Date</b> ____/____/____	<b>Event Start Time</b> ____ am/pm				
<b>Event Date Ends</b> ____/____/____	<b>Time Event Ends</b> ____ am/pm				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Set-Up Date: ____/____/____</td> <td>Tear-Down Date: ____/____/____</td> </tr> <tr> <td>Set-Up Time: _____ am / pm</td> <td>Tear-Down Completion Time: _____ am/pm</td> </tr> </table>		Set-Up Date: ____/____/____	Tear-Down Date: ____/____/____	Set-Up Time: _____ am / pm	Tear-Down Completion Time: _____ am/pm
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Set-Up Time: _____ am / pm	Tear-Down Completion Time: _____ am/pm				
<b>NOTE: You are responsible for the set-up and tear-down for your event.</b>					
If this is a recurring event, please explain (i.e., 4 <sup>th</sup> Weds. of every month): _____					
Estimated number of participants: _____					
Items needed: _____					
<b>YOU ARE RESPONSIBLE FOR SECURING THE ITEMS FROM OUR ADMINISTRATIVE ASSISTANT (<a href="mailto:admin@ffumc.org">admin@ffumc.org</a> or 865-966-8430) PRIOR TO YOUR MEETING AND RETURNING ALL ITEMS TO THEIR DESIGNATED LOCATION AT THE CONCLUSION OF YOUR MEETING. IF YOU NEED VIDEO OR SOUND IN WORSHIP CENTER, YOU MUST PAY A TRAINED A/V VOLUNTEER DIRECTLY FOR THEIR TIME.</b>					

Contact Person: _____	E-mail: _____
Phone: (home) _____	(cell) _____ (work) _____

### Do you need childcare?

Childcare Reservation Form is required. Please request the form by email when submitting Facility Usage Request form.

**Would you like an announcement in the Sunday bulletin?** \_\_\_\_\_ Yes \_\_\_\_\_ No

If "yes," you must email the announcement to [admin@ffumc.org](mailto:admin@ffumc.org) by noon on the Monday prior to the desired date of Sunday bulletin. (i.e., Announcement in Sunday, January 6, 2019, bulletin must be emailed by December 31, 2018.)

# USE REQUEST - FOOD SERVICE FACILITIES

(Submit this form at least three (3) weeks before your event.)

1. What is the name and contact information of the person in the user group who is responsible for kitchen operations?

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2. Is the meal to be catered?  Yes  No  
If yes, what kitchen spaces and equipment will be used?

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3. What is the menu (what is to be served)?

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4. Will arrangements/information regarding food allergies be made available to participants?  
 Yes  No

If so, what has or will be done to accomplish this?

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5. Have kitchen volunteers been identified and trained relative to their duties?  
 Yes  No

6. Will church cooking and eating utensils, plates and serving equipment be used (and washed/sanitized) or will disposables be used?

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7. Name and contact information of the person responsible for signing-off on kitchen clean-up and sanitizing?

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