

CHURCH MEMBER PROGRAMS

Facility Use Form

Mountain Vista United Methodist Church makes available the church facilities for programs with their objectives for fellowship, worship, and church management. There is no usage fee charged for these types of programs/meetings/activities. **Each applicant/chairperson of the Activity/Meeting must furnish the following applicable information:** Today's Date _____

1. Name of Activity/Meeting _____

2. Purpose of Activity/Meeting _____

Number of people attending _____ estimate _____ actual

Fundraiser: Yes No (circle one) If yes, fund(s) donation preference _____

Activity cost, if any: _____ To be paid by: _____

Is this Activity/Meeting for a specific group of people: _____

3. Who will be opening and locking Church for Meeting/Activity _____ / _____

(open) (lock up)

4. Is your Program of political origin? Yes No (circle one). If yes, describe: _____

5. Contact Person/Sponsor: _____

Phone Number(s): _____ E-mail address _____

6. Date of Activity/Meeting _____ Day (SU M T W TH F SA) (circle one)

7. Time meeting starts: _____: _____ AM/PM Time meeting ends: _____: _____ AM/PM

If ongoing program: Start Date _____ End Date _____

Time needed to set up: _____ hrs _____ minutes Time needed to clean up: _____ hrs _____ minutes

8. What area in the church do you need?

Sanctuary Building:

Sanctuary _____

Kitchen _____

Lg. Mtg. Rm. _____

Sm. Mtg. Rm. _____

UMC Women Rm. _____

Youth Office _____

Other _____

Outdoors Area: _____

Fellowship Building:

Fellowship Hall _____

Nursery (Rm. 1) _____

Split Rm. East (Rm. 2) _____

Split Rm. West (Rm. 3) _____

Open Rooms 2 & 3 _____

Single Rm (Rm.4) _____

Youth Rm (Rm 5) _____

Showers _____ W _____ M

Other _____

9. Will you need tables set up _____ How many _____ Chairs _____ How many _____

10. Will you need to use the technical equipment Yes No (circle one) If yes, please specify: _____

11. Will you need to use Church Instruments Yes No (circle one) If yes, please specify: _____

12. Will you be serving snacks, drinks, or food: Yes No (circle one). If Yes, please describe _____

13. How can the Events and Activities Committee help you: (please use backside of this form if necessary)

I have a copy of the "Facility Use Guidelines" for Mtn Vista UMC and have read them and agree to abide by them. Signed: _____ Date: _____

Approved by Trustees' Representative _____ Date: _____

Revised 5/4/09