

# Oxford Presbyterian Building Use Request Form

Event Name \_\_\_\_\_ Date(s) of Request: \_\_\_\_\_

Event responsibility:  OPC Internal OPC member/committee \_\_\_\_\_  
 External Sponsoring organization \_\_\_\_\_

Event Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Purpose/type of Event \_\_\_\_\_

Number of Participants Expected \_\_\_\_\_

Request is for:

One Time Event Date \_\_\_\_\_ Alternate Date?  YES  NO Date: \_\_\_\_\_  
(due to weather or unavailability)

Recurring Dates From: \_\_\_\_\_ to \_\_\_\_\_  Weekly Day of the week:  M  T  W  TH  F  
OR  
 Monthly Week/month:  1st  2nd  3rd  4th

Reservation Start Time: \_\_\_\_\_ Reservation End Time: \_\_\_\_\_

Event Start Time: \_\_\_\_\_ Event End Time: \_\_\_\_\_

Rehearsal needed? YES NO Date: \_\_\_\_\_

## Event Details:

Will a building key be required?  YES  NO Will you use the kitchen?  YES  NO  
(key use agreement required) (kitchen use policies apply)

Will you require a sound technician?  YES  NO Will you require an event monitor?  YES  NO  
(additional charge may apply) (for groups greater than 50)

Will you be charging an entry fee?  YES  NO  
for your event? If so, how much? \_\_\_\_\_

Is event outside of normal business hours?  YES  NO

If yes, person designated to open building: \_\_\_\_\_

Phone: \_\_\_\_\_

Person designated to close building: \_\_\_\_\_  
(if different than above)

Phone: \_\_\_\_\_

Buildings/Rooms Requested:

**Memorial**  
 Sanctuary  
 Molyneaux Lounge  
 Kitchen  
 Sunday school classrooms  
 Choir room  
 Other \_\_\_\_\_

**Seminary**  
 Main floor  
 Second floor  
 Kitchen  
 Other \_\_\_\_\_

Specify detailed setup and equipment needed on back of form.

Equipment Needed:

# Tables: \_\_\_\_\_ # Chairs: \_\_\_\_\_ TV/DVD player: \_\_\_\_\_ Projector / Screen: \_\_\_\_\_

Detailed set-up instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other special considerations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

|  |  |  |                  |  |
|--|--|--|------------------|--|
| Deposit: \$ _____  | <input type="checkbox"/> Cash                                      | <input type="checkbox"/> Check # _____ | Date paid: _____ | <b>Office Use:</b><br>Date Received: _____<br>Received By: _____<br>OPC Approval: _____<br>Added to Calendar: <input type="checkbox"/> |
| <i>The deposit amount is held until after the event is complete. If there are no additional charges for cleaning or damages and all fees have been met, the deposit amount will be refunded.</i> |  |  |                  |  |
| Event fee: \$ _____  | is payable to Oxford Presbyterian Church and due in full by: _____ |  |                  |  |
| Additional Fees : Amount \$ _____  | payable to _____   |  |                  |  |
|  | \$ _____ payable to _____  |  |                  |  |