

Approval of Senior Pastor (major event) _____ Date _____



St. James United Methodist Church

5540 Wayne Avenue
Kansas City, MO 64110
816-444-5588 816-333-6051 (f)

BUILDING USAGE REQUEST

Please use a separate form for each event.

Reporting Organization _____ Today's Date _____

Contact Person _____ Phone _____ (h) _____ (w)

Event/Activity * _____

Date _____

Attendance _____

Time & Duration _____

**Please use the section below if additional dates/times (for set-up, rehearsals, etc.) are needed for this event.*

	1	2	3
Event/Activity	_____	_____	_____
Date	_____	_____	_____
Time & Duration	_____	_____	_____

FACILITY NEEDS

- | Equipment | St. James | Ministry/Organization |
|--|--|---|
| <input type="checkbox"/> Easel/Flip Chart | <input type="checkbox"/> Sanctuary | <input type="checkbox"/> Pastoral Staff |
| <input type="checkbox"/> Projection Screen | <input type="checkbox"/> Vaughan Chapel | <input type="checkbox"/> Ushers |
| <input type="checkbox"/> Projector | <input type="checkbox"/> Ministry Mall | <input type="checkbox"/> Audio/Visual |
| <input type="checkbox"/> Extension Cords | <input type="checkbox"/> Fellowship Hall | <input type="checkbox"/> Count Team |
| | <input type="checkbox"/> Kitchen | <input type="checkbox"/> Music Ministry |
| | <input type="checkbox"/> Meeting Room | <input type="checkbox"/> Other |

Will your event require set up and tear down? _____

Will your event require security personnel? _____

PLEASE NOTE THAT USER FEES MAY BE INCURRED

PLEASE USE REVERSE SIDE OF FORM FOR ROOM DIAGRAM/SET-UP DESCRIPTION

FOR OFFICE USE ONLY

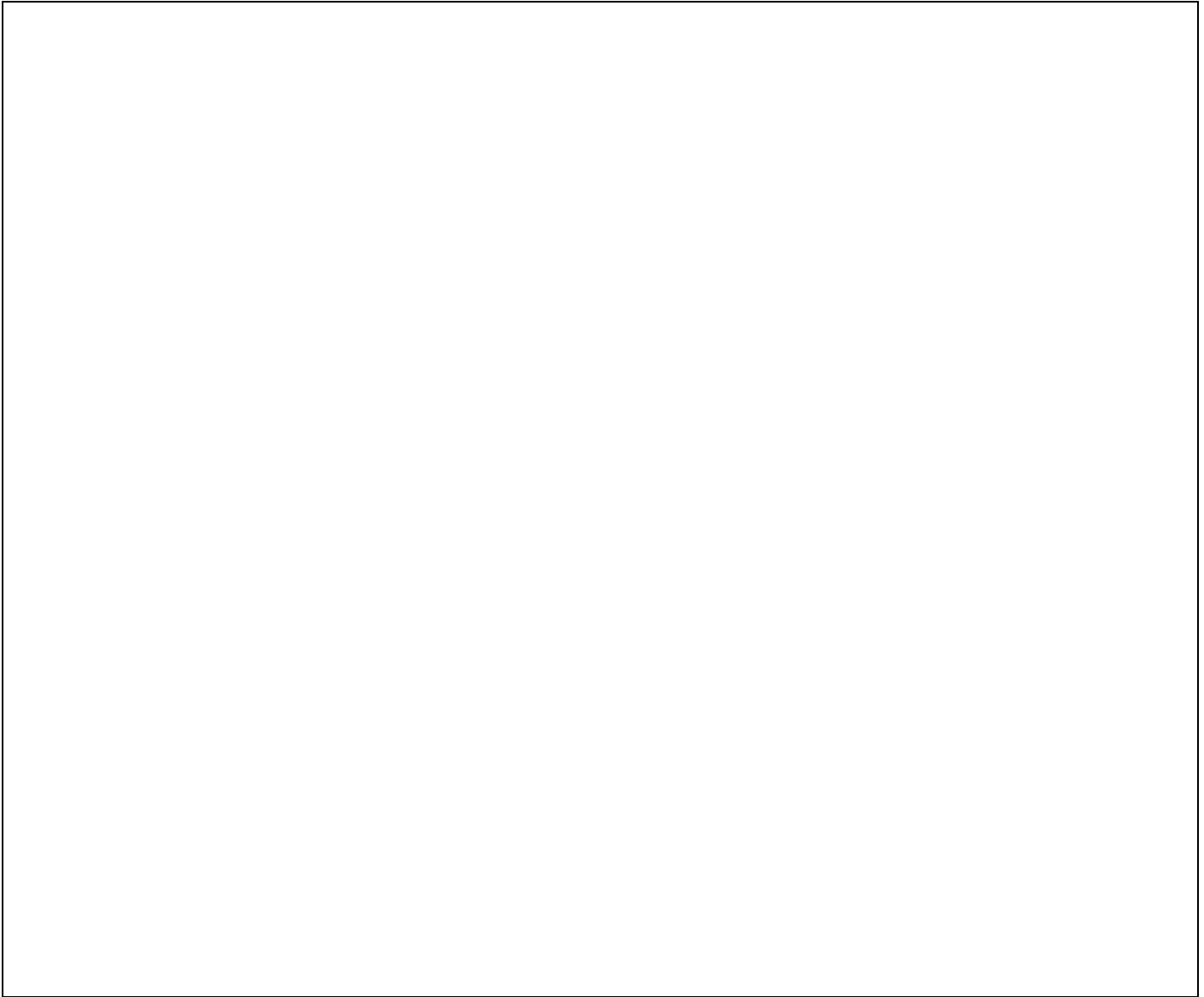
Approval Timeline

- | | | |
|-----------------------------------|---------------------------------------|---------------------------------|
| <input type="checkbox"/> STANDARD | <input type="checkbox"/> INTERMEDIATE | <input type="checkbox"/> URGENT |
| Maximum 4 weeks for approval | Within _____ days | Within 72 Hours |

APPROVAL DATE _____ APPROVED LOCATION _____

ROOM DIAGRAM

Indicate number of tables, chairs, etc.



Special Notes/Requests:

PLEASE RETURN COMPLETED FORM TO THE CHURCH SECRETARY