ORCHARD KNOB MISSIONARY BAPTIST CHURCH

FACILITY USAGE REQUEST FORM

ROUTE TO:
(1) Secretary_____
(2) Facilities Committee_____

OKMBC ACTIVITY X ☐
COMMUNITY ACTIVITY ☐
OTHER ☐

DESCRIPTION OF ACTIVITY/EVENT_____Church-wide Picnic_____
DATE REQUEST SUBMITTED___SAT 5/30/26_____
DESIRED DATE/TIME_____SAT 8/15/26 @ 11a-4p_____
OPTIONAL DATE/TIME_____
NUMBER OF PEOPLE ANTICIPATED_____300_____
NUMBER OF TABLES NEEDED? _____?___ (6-8 chairs per table)
NAME OF HOSTING MINISTRY/ORGANIZATION _____Church_____
PRESIDENT/CHAIRPERSON/LEADER___Andra Johnson &_Travis Reed_____
CONTACT PERSON_____Travis Reed _____
PHONE NUMBER __423-304-3313_____
E-MAIL ADDRESS__tlreed1@epbfi.com_____

WHAT AREA(S) OF THE CHURCH WILL BE USED?

Sanctuary	_____	Classroom(s)	_____
Chapel	_____	Conference Room	_____
Fellowship Hall	_____	Library	_____
Kitchen	_X____	Education Wing	_____
Bride's Room	_____	All Areas Listed	_____
Bridesmaid Room	_____	Other (Specify)	___X__ (Camp Jordan)

WILL YOU NEED TO DECORATE IN ADVANCE? _____NO_____
IF YES, PLEASE IDENTIFY _____
WILL FOOD BE SERVED? _____YES_____
CATERED? _____ PREPARED IN THE KITCHEN? _X____
WILL YOU REQUIRE THE USE OF A PODIUM? _____
WILL YOU REQUIRE THE USE OF MEDIA EQUIPMENT/ SERVICES? _____

Microphone(s)	_____	DVD Player	_____
Computer	_____	CD Player	_____
Projector/Screen	_____	Technician(s)	_____

WILL YOU REQUIRE PARKING SECURITY? _NO_____

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For Facilities Committee Use Only:

Deacon Chairman_____ Trustee Chairman_____

APPROVED_____ DENIED_____ OTHER_____ DATE_____

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Official Copy Revised 8/4/2014
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