

ORCHARD KNOB MISSIONARY BAPTIST CHURCH**FACILITY USAGE REQUEST FORM**

OKMBC ACTIVITY
 COMMUNITY ACTIVITY
 OTHER

ROUTE TO:
 (1) Secretary _____
 (2) Facilities Committee _____

DESCRIPTION OF ACTIVITY/EVENT *Singles Ministry Meeting*
 DATE REQUEST SUBMITTED *7-27-2022*
 DESIRED DATE/TIME *Aug 16, 2022 - 6:00 - 7:00*
 OPTIONAL DATE/TIME *Aug 23, 2022 6:00 - 7:00*
 NUMBER OF PEOPLE ANTICIPATED *10*
 NUMBER OF TABLES NEEDED? *(6-8 chairs per table)*
 NAME OF HOSTING MINISTRY/ORGANIZATION *Singles*
 PRESIDENT/CHAIRPERSON/LEADER *Diane Williams*
 CONTACT PERSON *Diane Williams*
 PHONE NUMBER *423-880-2485*
 E-MAIL ADDRESS *angie1093299@yahoo.com*

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

| | | | |
|-----------------|-------|------------------|-------------------------------------|
| Sanctuary | _____ | Classroom(s) | _____ |
| Chapel | _____ | Conference Room | _____ |
| Fellowship Hall | _____ | Library | <input checked="" type="checkbox"/> |
| Kitchen | _____ | Education Wing | _____ |
| Bride's Room | _____ | All Areas Listed | _____ |
| Bridesmaid Room | _____ | Other (Specify) | _____ |

WILL YOU NEED TO DECORATE IN ADVANCE? *N/A*

IF YES, PLEASE IDENTIFY _____

WILL FOOD BE SERVED? *NO*CATERED? *PREPARED IN THE KITCHEN?* _____WILL YOU REQUIRE THE USE OF A PODIUM? *NO*WILL YOU REQUIRE THE USE OF MEDIA EQUIPMENT/ SERVICES? *NO*

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

WILL YOU REQUIRE PARKING SECURITY? *NO*

For Facilities Committee Use Only:

Deacon Chairman _____ Trustee Chairman _____

APPROVED _____ DENIED _____ OTHER _____ DATE _____