# FACILITY USE REQUEST FORM

For weddings, memorials and church-approved gatherings

## 1 | REQUESTOR INFORMATION

**Full name / primary contact**

**Ministry / organization (if applicable)**

**Phone number**

**Email address**

## 2 | EVENT INFORMATION

**Type of event (select all that apply)**

- ☐ Wedding
- ☐ Wedding reception
- ☐ Celebration of life / memorial
- ☐ Ministry gathering
- ☐ Other church-approved event

**Event name / brief description**

## 3 | REQUESTED SPACE & SCHEDULE

- ☐ Sanctuary
- ☐ Family Life Center
- ☐ Other space:

**Requested date (MM/DD/YYYY)**

**Event start time**

**Event end time**

**Arrival / setup time**

**Departure / cleanup time**

**Expected guests**

## 4 | EVENT NEEDS

**Will food or refreshments be served? (choose one)** ☐ Yes ☐ No

**Please note seating, audiovisual, accessibility or other needs:**

SUBMIT COMPLETED FORM

Brother Cade, Business Manager | ecade@ormbc.org

Submission does not reserve the facility. All requests are subject to church review and availability.

This form is for church-approved functions, not private parties. Additional requirements may apply.