

Facilities Reservation Form

Farragut Church of Christ
136 Smith Road
Knoxville, TN 37922

Phone: (423) 966-5025
Fax: (423) 966-0572
Facility Manager: 301-5025

Event Description: _____ **Estimated Attendance:** _____

Sponsoring Ministry (for congregational events only): _____

Event Date: _____ **Event Times** (setup thru cleanup): _____

REPEATING EVENTS	<i>If this is a repeating event, please complete the following section: (Example: We will meet on the 2nd Tuesday of the month, beginning 2/4/03 and ending 8/12/03.)</i>	
	<u>Circle one below.</u> <u>Circle one below.</u>	
	We will meet on the: 1 st 2 nd 3 rd 4 th Every	Sun Mon Tue Wed Thur Fri Sat
	Beginning Date: _____	Ending Date: _____
	Start Time (including setup) : _____	End Time (including cleanup) : _____

**Reservations are not confirmed, nor will events be announced,
until the church secretary has received this form.**

Facilities Needed <small>(Please check all that apply)</small>	Equipment Needs														
<input type="checkbox"/> Atrium <input type="checkbox"/> Auditorium <input type="checkbox"/> Classroom(s) _____ <input type="checkbox"/> Family Life Center <input type="checkbox"/> Grounds <input type="checkbox"/> Kitchen * (See below) <input type="checkbox"/> Library <input type="checkbox"/> Media Center <input type="checkbox"/> Nursery <input type="checkbox"/> Patio (outside Atrium) <input type="checkbox"/> Playground <input type="checkbox"/> Teen Room <input type="checkbox"/> Other	<p>TABLES/SEATING (Enter Number Needed)</p> <p>_____ Oval Tables (seat 8 per table; 30 available)</p> <p>_____ Rectangle Tables (seat 10 per table; 12 available)</p> <p>_____ Upholstered Chairs (220 available)</p> <p>SOUND SYSTEM/AUDIO VISUAL EQUIPMENT (Please check items needed)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> Microphones, speakers, etc.</td> <td>Location: _____</td> </tr> <tr> <td><input type="checkbox"/> TV-VCR</td> <td>Location: _____</td> </tr> <tr> <td><input type="checkbox"/> Overhead projector and screen</td> <td>Location: _____</td> </tr> <tr> <td><input type="checkbox"/> Podium/Speaker Stand</td> <td>Location: _____</td> </tr> <tr> <td><input type="checkbox"/> White board</td> <td>Location: _____</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td>Location: _____</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td>Location: _____</td> </tr> </table>	<input type="checkbox"/> Microphones, speakers, etc.	Location: _____	<input type="checkbox"/> TV-VCR	Location: _____	<input type="checkbox"/> Overhead projector and screen	Location: _____	<input type="checkbox"/> Podium/Speaker Stand	Location: _____	<input type="checkbox"/> White board	Location: _____	<input type="checkbox"/> Other	Location: _____	<input type="checkbox"/> Other	Location: _____
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<input type="checkbox"/> Other	Location: _____														
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- If you are using the kitchen, be sure to complete a Clean Up Checklist (in plastic holder on Kitchen door) and leave a signed copy in the holder as you leave.
- If you are using the kitchen for the first time, our Kitchen Manager will contact you for an orientation session.

_____ Responsible Party (PLEASE PRINT)

_____ Phone

_____ Today's Date