

USAGE REQUEST FORM  
First Baptist Church, Savannah, MO  
(Items with an asterisk are required)

**\*Event Title or Description:** \_\_\_\_\_

**\*Purpose:** \_\_\_ Spiritual Growth \_\_\_ Evangelism \_\_\_ Administration \_\_\_ Fellowship

\_\_\_ Community Event \_\_\_ Wedding \_\_\_ Gym/Room Use \_\_\_ Other: \_\_\_\_\_

\*Age Group Involved:

**Scheduling Information:**

\*Start Date: \_\_\_\_\_ \*End Date: \_\_\_\_\_

\*Start Time: \_\_\_\_\_ \*End Time: \_\_\_\_\_

\*Key Needed? YES/NO                      Sound System Needed? YES/NO  
(For either of the above you MUST speak with the Administrator or his designee)

**Leader Information**

\*Name: \_\_\_\_\_ **Member? YES/NO**

\*Address (If Non-Member): \_\_\_\_\_

\*Phone numbers: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

If this requires church equipment to be used off site, please fill out the following:

Location(s) of Equipment Usage: \_\_\_\_\_

Phone Number(s) of Location(s): \_\_\_\_\_

\*Will you be using the vans? YES/NO  
If yes, who is driving: Small Van: \_\_\_\_\_ Large Van: \_\_\_\_\_  
(Please note, specific driver's license and registration with the insurance carrier may be required.)

**SEE BACK OF FORM TO RESERVE EQUIPMENT AND ROOMS**  
**If you need to publicize your event, please give information to the church office on a separate form or paper.**

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OFFICE USE ONLY

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_ Approved? YES/NO - By? \_\_\_\_\_  
Requestor Contacted? YES/NO - By? \_\_\_\_\_ On Calendar? YES/NO - By? \_\_\_\_\_  
Administrator Contacted (If Needed) YES/NO      Extension Granted Until/By: \_\_\_\_\_/\_\_\_\_\_

