



**BLACK ROCK
CHURCH**

Facility Request Room Set-up Form

Submitted By: _____ Cell Phone: _____

Ministry/Renter: _____ Name of Event: _____

Date of Event: _____ Time: From: _____ AM/PM To: _____ AM/PM

Room(s) Needed: _____

Equipment Needed: (Please check off what you need)

Room Setup Needs:

[] 5' Round Tables (Seats 8-9): How Many?: _____

[] 6' Rectangular Tables (Seats 8): How Many?: _____

[] 8' Rectangular Tables (Seat 10): How Many?: _____
(Woodruff Only)

[] Chairs: How Many?: _____

Diagram of Room Set-Up

(Please draw diagram showing location and number of chairs and tables as you wish to have the room set-up)

For Office Use Only

[] Approved and Scheduled

[] Not Approved

Authorized Signature: _____ Date: _____