



Mt. Zion Baptist Church Request for Use of Facilities Form / Room Reservations

In order to prevent several meetings from taking place at the same time and locations, it is mandatory that all meeting rooms be reserved at least one week in advance. Requests for rooms will be approved on a first come first serve basis.

Date: _____ Requestor Name: _____

Phone #: _____ Email: _____

Ministry Department: _____

Room(s) Reserved for: _____

Date and Time: **Start Date:** _____ **End Date:** _____

Start Time: _____ **End Time:** _____

Member **Non Member** Organization: **Not for Profit** **For Profit**

Check the box:

Room 1 **Room 4** **Room 5** **Room 6** **Room 10** **Room 12** **Café**

Conference Room 3 **Youth Building** **Spanish Church** **Sanctuary**

Preferred Layout: Classroom Theater Round U-Shaped Conference

Equipment Needed: _____

Number of Attendees: _____ Food/Refreshments served: YES NO

Person(s) responsible for cleanup: _____

Comments:

Deposits: N/A **Yes** **Amount** _____

Signature of Requestor: _____ Date: _____

Approved by: _____ Date: _____

To make reservations call Ministry Services Office at 909-983-2411 ext. 243, email form to mservices@mtzionontario.com or fax to 909-983-6244 Attn: Ministry Services
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rev.7/7/14