

EVENT SCHEDULING FORM

CHURCH EVENTS WILL TAKE PRECEDENT OVER ANY OTHER EVENTS

REQUEST AT LEAST (3) WEEKS IN ADVANCE

Use this form to request a event/date to be added to the main church calendar.

You will be contacted with approval of event via email or phone.

Today's Date: _____ Event Date: _____

Day of the Week for the Event: ____S ____M ____T ____W ____TH ____F ____S

Event/Group Name: _____

Event Set-up Time: _____ Take Down Time: _____

Event Start Time: _____ Event Ending Time: _____

Is the a church related activity? ____ Yes ____ No Number Expected: _____

Destination if off church property: _____

Church Property Location:

Chairs Per Table: Round Table (6-8) Rectangle Table (6-8)

(Please illustrate table/chair arrangement on the back of this form.)

____ Worship Center (400 Chairs or 20 Round Tables)

____ Fellowship Hall/Boomtown (100 Chairs or 10-12 Round Tables)

____ Community Room (1 Round Table)

____ Conference Room #101 (Table w/10 Chairs)

____ Room #103 (35-40 Chairs or 5 Tables)

____ Room #104 (35-40 Chairs or 5 Tables)

List any other rooms needed: _____

Do you need any of the following?

____ Audio/Visual (CONTACT CRAIG DALTON 865.313.4452)

____ Kitchen (**PREPARED FOODS ONLY**) (YOU WILL BE RESPONSIBLE FOR CLEAN-UP)

____ Building Keycode (CONTACT THE CHURCH OFFICE—865-524-1204) Keycode# _____

____ Childcare (Church Events Only)

____ Custodial (CONTACT THE CHURCH OFFICE—865.524.1204)

List any special equipment or instructions: _____

Person Responsible: _____ Phone: _____

Email: _____

By signing this form you are stating that you release Buffat Heights Baptist Church, it's pastors/officers or members from any liability. You are also affirming you are in agreement with the 2000 Baptist Faith & Message (can be viewed on our website). Furthermore, you are assuming responsibility for turning off all lights/equipment and for securing the building by shutting and locking all doors.

OFFICE USE ONLY:

____ Event Approval ____ Shayla ____ Dave ____ Custodian _____ Date Entered on Main Calendar

Special instructions: _____

Draw a diagram of how you would like the room(s) to be setup below:

Fellowship Hall/ Boomtown
\$50

Worship Center
\$150

Office
#100

Library
#101

#102

#103
\$35

#104
\$35

#105

#106

#107

#108

#109

#110

#111

#112

#113

#114

Restrooms

Information Desk

Community Room

Restrooms Women Men

Lobby

Main Entrance

Side Entrance

Side Entrance

NON-CHURCH EVENT FEES

AREA/ROOM(S) RENTED	PAID
Fellowship Hall/Boomtown \$50	_____
Other Room(s) \$35	_____
Worship Center \$150	_____
Audio/Visual Tech \$35 per hour	_____
Total Due \$	_____

Make checks payable to BHBC
ALL FEES MUST BE PAID 2 WEEKS PRIOR TO THE EVENT