HOSPITALITY: F	acility Re	equest Form	Event Date:	7	Today's Da	te:	
Your Name	Group						
Address			City		State	Zip	
Home Phone	Work Phone						
Email Address			WORK Friend				
Liliali Addiess		Signature					
		Signature	-				
Event Name:							
Event Description:							
·		A -ll	Va. da		Obildes		
Estimated Number Atte	enaing:	Adults:	Youth: _		Children:		
What Room(s) / Area(s)	are requested		Custodial Staffing Re	equired?			
	<u>.</u>		What time will the event				
What time does the even	ent start?		end?				
How much time do you			How much time after the				
before event to setup/o	lecorate?		event will be needed for				
If Available, wha	t do you ne	ed? How many?	If Available, Audio/Video Needs				
Long Tables		Other?	, , , , ,			Y N	
Round Tables							
Chairs			If yes, email thill@providencebc.org at least 5				
Speaker Stand	peaker Stand				t for assist	ance.	
White Board			Microphone		Projector		
Chalk Board			TV/VCR	3	Screen		
Extension Cord							
Easel			If requesting food,				
Tripod Draw your room setu			complete Hospitali	ty/Food S	vc/Kitchen	on reverse	
Church Account to Cha	Cost Due:		Check #:	iiooto			
All non-church events	3 Will Heeu (C		•	mity mou	ance certi	icate.	
A = = = = 1/5		*** For Church Admir	•	D '' "			
Account/Fees:				Permit #			
Authorized by:				Date _			

HOSPITALITY: Kit	Today's Date:					
Event Name						
Event Description:	/	-(/)]	1 () D'	/ \ D (\ Ma	- (' ()	
) вгеакта	st () Lunc	neon () Dinr	er () Reception () Me	eting ()	
What time do you want th		Notes				
be available?						
		1				
Do you need food service						
	ou need?	How many?		What do you	need? I	How many?
China Plates		Serving I	Pieces Needed	Styrofoam Plates		Other - Notes
China Bowls				Styrofoam Bowls		
China Dessert Plates				Styro Dessert Plates		
China Bread Plates				Styrofoam Cups		
China Cup & Saucers				Plastic Forks		
Stainless Forks				Plastic Spoons		
Stainless Spoons		1		Plastic Knives		
Stainless Knives		1		Paper Dinner		
Glass Punch Bowl		1		Paper Beverage		
Glass Punch Cups		1		Paper Table Covers		
Silver Punch Bowl *		1		Serving Spoons		
Punch Ladle *		1		Tongs		
Silver Trays *					INENS	
Silver Candelabra *		1		Linen Table Cloths for R		
Chafing Dishes-Sterno*				Linen Table Cloths for	touria	
Cambro *				Linen Napkins		
* Not available to outside of	aroups			Lineri Hapkine		
Food Menu	ı		Beverages & Ice			
				2010.4900 4.100		
All non-church events w	vill need to	sign a usa	age agreement	and provide liability ins	urance	certificate.
		_	ago agroomen	and provide nating inc		
** FOR HOSPITALITY DIRECT			A m a unt	T	NOTES	
Accounting of Co	SIS	Quantity	Amount	<u>-</u>	NOTES	
Paper				_		
Food				4		
Pantry				4		
Laundry				4		
Labor-Host				4		
Labor-Server				4		
Labor-Dishwasher				-		
Other:				Cost Due: Check #:		
TOTAL:				Approval Church Adm	Approval Church Administrator: Date:	