

**Office Use Only**

\_\_\_\_\_ Approved By  
\_\_\_\_\_ Date Approved  
\_\_\_\_\_ Date Posted  
\_\_\_\_\_ Fee Amount  
\_\_\_\_\_ Fee Paid

# Building Request Form

**Hope Lutheran Church**  
1301 Vintage Lane, Rochester, NY 14626  
Phone: 723-4673 Fax: 723-8549

**\*These fields are required to confirm event booking.**

\_\_\_\_\_ Bill  
\_\_\_\_\_ Justin  
\_\_\_\_\_ Laurie  
\_\_\_\_\_ Brett  
\_\_\_\_\_ Jim W.  
\_\_\_\_\_ Tech Arts  
\_\_\_\_\_ Marilyn  
\_\_\_\_\_ Recurring

**\*DATE(S) NEEDED:** \_\_\_\_\_

**\*START TIME OF EVENT:** \_\_\_\_\_ am/pm **\*END TIME OF EVENT:** \_\_\_\_\_ am/pm

Amount of Set Up Time Required \_\_\_\_\_ Amount of Tear Down Time Required \_\_\_\_\_

Is this a recurring event? \_\_\_\_\_ Frequency \_\_\_\_\_

**\*EVENT NAME:** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_

Ministry or Group: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

**\*GROUP CONTACT:** \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Facilities Needed

(Check all that apply. See back for set up choices)

Room (s) # \_\_\_\_\_; \_\_\_\_\_; \_\_\_\_\_

\_\_\_\_\_ Chapel

\_\_\_\_\_ Family Life Center

\_\_\_\_\_ Foyer

\_\_\_\_\_ Manned Table

\_\_\_\_\_ Display Table Only

\_\_\_\_\_ Kitchen

\_\_\_\_\_ Resource Room  
(Across from the kitchen)

\_\_\_\_\_ Upper Room

\_\_\_\_\_ East \_\_\_\_\_ West

\_\_\_\_\_ The Gathering Place (West Lounge)

\_\_\_\_\_ North \_\_\_\_\_ South

\_\_\_\_\_ Worship Too/Conf Room

\_\_\_\_\_ Worship Center

PLEASE CHECK IF  
THIS EVENT IS  
**OFF CAMPUS** \_\_\_\_\_

### **CHILD CARE NEEDED?**

\_\_\_\_\_ Play Nursery  
(Early Childhood)

\_\_\_\_\_ Crib Room  
(Infants)

### **MISC. Needs:**

Podium \_\_\_\_\_

Music Stand \_\_\_\_\_

Easel \_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

### Audio/Visual Equipment Needed

\_\_\_\_\_ Microphones

\_\_\_\_\_ TV/VCR/DVD

\_\_\_\_\_ Overhead Projector

\_\_\_\_\_ Screen

\_\_\_\_\_ Video Projector

\_\_\_\_\_ Lap Top

\_\_\_\_\_ Other (please explain)

Do you have someone in your group who will be responsible for operating the sound and/or AV equipment? If so, please indicate name of person:

\_\_\_\_\_

Name of person in your group who has the necessary key to open and close building: \_\_\_\_\_

**IT IS THIS PERSON'S RESPONSIBILITY TO MAKE SURE THE BUILDING IS SECURELY LOCKED AND LIGHTS OUT AND WINDOWS CLOSED WHEN THEY LEAVE.** If you do not have such a person, please make arrangements with the church office to provide you with a key. *The key to open room(s) is available in the church office for daytime events.*

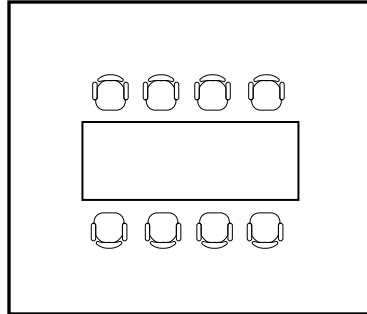
# CHOICE ROOM SET UPS

**NOTE:** Set-ups by Custodians does **NOT include** pianos, stages, coffee, table coverings, etc. These are left to the requestor.

**A.**  
 **Conference Style**

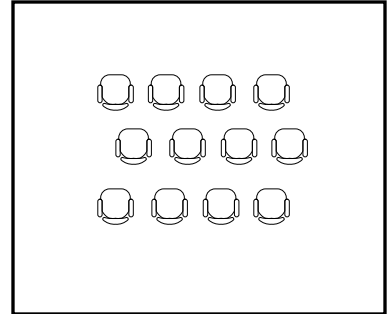
# Tables \_\_\_\_\_

# Chairs \_\_\_\_\_



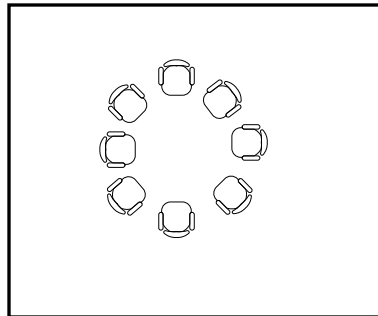
**B.**  
 **Lecture Style**

# Chairs \_\_\_\_\_



**C.**  
 **Small Group Style**

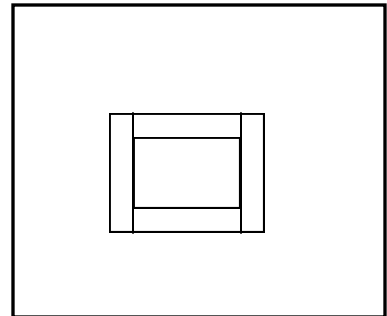
# Chairs \_\_\_\_\_



**D.**  
 **Square/Rectangle**

# Tables \_\_\_\_\_

# Chairs \_\_\_\_\_

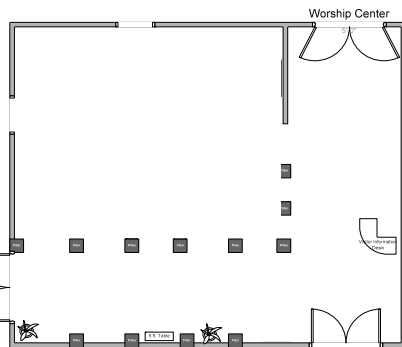


**E.**  
 **Foyer**

(Please draw set up)

# Tables \_\_\_\_\_

# Chairs \_\_\_\_\_



**F.**  
 **Other**

Please draw set up

# Tables \_\_\_\_\_

# Chairs \_\_\_\_\_

