

SPECIAL EVENTS PHYSICAL NEEDS FORM
for
Rentals

- 1. Name of Event:
- 2. Date of Event:
- 3. Start Time of Event: End Time of Event:
- 4. Please unlock the church at _____ am/pm and lock at _____ am/pm
- 5. Rooms required: Church Proper _____ Great Hall _____ Westminster Lounge _____
Board Room _____ Kitchen _____ Chapel _____ Gym _____
- 6. Please describe/draw a “map” or room set up of what you require in what room(s). Eg. # of chairs, # and shape (round or rectangular) of tables, layout of chairs and tables, special equipment (podium, microphone, extension cord(s) etc.). Use the reverse side of this page if you require more space.

(Lessee)

(Administrative Assistant)

For office use only:

Custodian setting up for this event:	Custodial hours charged:	hours
Custodian working at this event:	Custodial hours worked:	hours