



Bethlehem #1 Missionary Baptist Church
Sandridge Community, P. O. Box 1340 Conway, SC 29528
(843)397-1356 Pastor's Study • (843)397-2703 Church Office

MEMBERS ONLY

REQUEST TO USE CHURCH'S FACILITIES

This is submitted to request the use of the Church's Facilities and to verify that I, _____ am a member in good standing with my church. I understand that I must be (21) years of age to rent the church facilities. I take full responsibility of these facilities.

Purpose: (Reason for use of Facility)

Date the event will be held: _____
Approximate Number Attending: _____
Requested beginning time: _____
Approximate ending time: _____
Rehearsal date and time: _____

Responsible Person to ensure Facilities are protected and secured if applicable:

- ❖ MEMBERS THAT'S HAVING AN EVENT FOR A NON MEMBER THE FEE IS **ONE HUNDRED FORTY DOLLARS (\$140)**
- ❖ MEMBERS THAT'S HAVING A PRIVATE EVENT AND THE CHURCH IS **INVITED ONE HUNDRED FORTY DOLLARS (\$140)**
- ❖ WITH THE EXCEPTION OF FAMILY REUNIONS DONATIONS WILL BE APPRECIATED
- ❖ MEMBER IS RESPONSIBLE FOR CLEANING THE FACILITY AFTER THE EVENT. FACILITY WILL BE CHECKED BY THE TRUSTEE MINISTRY. Audio/Visual service must be contacted if needed.

Print Name _____

Member Signature _____

Date _____

Trustee Signature _____