

Good Shepherd Evangelical Lutheran Church
1700 North Towne Avenue
Claremont, CA 91711

FACILITY USE REQUEST

Entity requesting use: _____

Contact Person: _____ Phone Number _____

Email/Address _____

Alternate Contact Person _____ Phone Number _____

Email/Address _____

Purpose of Activity/Event _____

Is this activity/event _____ recurring _____ one time?

Your Preference: Date(s) _____

Time(s) from _____ to _____ Total hours _____

Room(s) requested _____

Other Facility Requirements: _____ Tables # _____ Chairs # _____

_____ Sound system _____ Projector _____ Screen

_____ Other _____

Additional Assistance: _____ Committee Help _____ Office (Typing, mailing) etc.

_____ Pastoral attendance _____ Setup/Cleanup _____ Access (Key prior to event)

_____ Other _____

Please Specify _____

Signature of Contact Person: _____ Date: _____

COUNCIL APPROVAL: Date _____ Signed: _____

Process:

1. Office Staff pencil onto Calendar before approval.
2. Present form to Council.
3. Approved form forwarded to office.
4. Event entered into Calendar.
5. Emergency approval available through Executive Committee.

For Fellowship Hall, turn over to Council President or Executive Committee. Email church office at office@egoodshepherd.org or call 909-626-2714 if immediate use is required.