Facilities/Event Request Form

Organizer Information

Event Organizer	
Event Organizer Phone #	Email
Is the Event Organizer a Shiloh Mem	nber/Regular Attendee?
Assistant Leader	
Asst. Leader Phone #	Email
Event Information	
Name of Event	
Date of Event	
	Clean Up End Time
Event Start Time	Event End Time
Purpose of Event	
	Estimated Attendance
Do you want this announced in the G	Greeter? If so, when?
•	out this event that will be adapted for both the Greeter and/or the entences long and should give as much information as possible, interested in attending.

Rooms/Facilities Requested (please check all requested)

Requested	Locations	Shiloh Members/ Regular Attendees	Non-Members/ Non-Attenders
	Sanctuary	No charge	\$300
	Fellowship Hall and/or Kitchen	No charge	\$200
	Atrium	No charge	No charge
	Nursery	No charge	No charge
	Room 1	No charge	No charge
	Room 2	No charge	No charge
	Room 3	No charge	No charge
	Room 4	No charge	No charge
	Room 5	No charge	No charge
	Room 6	No charge	No charge
	Room 7	No charge	No charge
	Oasis	No charge	\$300
	Picnic Shelter & Gazebo	No charge	No charge
	Pastor	\$100	\$100
	Pianist/Organist	\$100	\$100
	Sound Technician	\$100	\$100
	Custodian	\$100	\$100
	TOTAL DUE		
	Damage Deposit (returned if no damages occur)	\$200	\$200

All events must be approved by the Pastor before being added to the calendar.

Pastor Signature _____ Date _____

Note: Half of the total fee plus the damage deposit must be received at the time of reservation to

confirm the event date. The remainder will be due prior to the event.