



CROSS ROADS CHURCH
 A Brethren in Christ Ministry
 800 Donegal Springs Road
 Mount Joy, PA 17552
 717/653-1616
 crbic.office@gmail.com

Event Request Form

- Member/Attender Non-Profit Profit
 Ministry Use

For Emergency Use Only
717/371.1526

Person Making Request: _____ Date of Event: _____

Address: _____ City: _____ State: _____ Zip: _____

Primary Contact Phone: (____) _____ Email: _____

Group Name: _____ Purpose: _____

Time of Actual Event: From _____ To: _____

Time Needed in Room (Open/Close Church): From _____ To: _____

Number of People Expected: _____

Set Up Needs? ___ Yes (Complete Section A) ___ No

Food Needs? ___ Yes (Complete Section B) ___ No

Technology Needs? ___ Yes (Complete Tech Form) ___ No

(Includes TV/DVD, audio, projection)

Please Complete All Relevant Sections on Back

Make all checks payable to Cross Roads BIC Church. A \$50 non-refundable deposit is required and due at the time of application. The \$50 deposit will be applied toward the rental fee.

I have read, understand and agree to adhere to the guidelines for facility use (summary on reverse).

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Rental charge: \$ _____ Deposit/Donation received: ___ Yes ___ No Amount: \$ _____

Balance due: \$ _____

Signature Facilities Coordinator

Date

CC: Trustee / AV tech / Food services / Custodian / Treas./ Setup

Distributed: _____

Section A: Set Up

Facility Areas Requested

- Family Life Center (FLC) Café FLC & Café
 Fellowship Hall Classroom(s) _____
 Great Room Child Care areas

How many tables needed? _____ Round Tables Rectangular Tables

Diagram set up on separate piece of paper and attach.

Other Notes: _____

Section B: Food Needs

Kitchen Use Contact Kitchen Coordinator for details and usage requirements at _____

If catered, name of caterer: _____ License # _____

Other: _____

Section C: Technology Form

If needed, complete attached Technology Form.

Facility Use General Guidelines

Use of the Cross Roads Church Facility is to be in harmony with the principles and standards of the congregation and the Brethren in Christ Church. The following is a summary of the Guidelines found in greater detail and explanation in the *Facilities Use Policy Manual*, Sections 6 – 10. This *Manual* is available as a PDF online at our website— www.crossroadsbic.com — or through the Church Office.

1. Intended activities and music should be in keeping with the ethical standards outlined in the *Facilities Use Policy Manual*.
2. Use of other areas of the Facility will not be permitted during scheduled services or programs of the congregation.
3. Regular and planned congregational functions have priority over other users.
4. General rules of facility use include no smoking, alcohol beverages and/or illegal drugs anywhere in the facility. Food and drink must stay in the area where served, except by prior permission. Athletic equipment used must meet the standards outlined in Section 7.7 of the *Manual*.
5. The User assumes all responsibility and liability for proper and appropriate use of the facility areas rented.
6. The building shall be vacated by 10:30 PM unless previously arranged.
7. Users:
 - Agree to return the room(s) to the condition as it was when they arrived (vacuumed, etc.)
 - Provide adult (21+) supervision for activities. Children must be supervised at all times.
 - Immediately report any soil or spillage to the Trustees or Custodians.
 - Make sure all lights are turned off and doors shut and locked when leaving.
 - Do not change thermostat settings. Trustees pre-set the thermostats for facility use.
8. Paper products and supplies are the user's responsibility to provide. All garbage must be removed from the premises. Use of Cross Roads Church's supplies is not permitted unless previously arranged.

Technology Needs

Event coordinator: _____

Cross Roads Facility Rental

Cell phone: _____

Tech Operator Daily Rates: \$50 (for up to 3 hours) \$12/each additional hour

- Church office will provide you with contact info for Tech Operator prior to event
- Cash or Check, **paid directly to operator at end of event** (please do this in a timely manner)

1. Audio Needs (sound system)

- Background Music? Yes No
Type *Circle:* CD MP3 player Flash drive Live music
Provided by? _____
- Speech? Yes No
Microphones? _____
- Music/Band? Yes No
What instruments? _____

Microphones? _____
- Other audio details? _____

2. Visual Needs

- TV/DVD cart? Yes No
Location? _____
- Projector/Screen(s)? Yes No
- Need Computer? Yes No
If YES, please provide video/slideshow file prior to event (contact tech operator)
- If using video or slide show what format? _____

Describe your projection needs: _____

3. Any other tech needs? (recording, internet connection, etc.)

