McKernan BAPTIST CHURCH — MBC Facility Booking Request Form (External)

Event _____ Private ☐ Public ☐ **Event Date**(s) _____

☐ S ☐ M ☐ Tu ☐ We ☐ Th ☐ F ☐ S

ATTENDANCE	Setup Time	Event Start Time	Event End Time	Takedown Time

Organizer's Name _____   Organizer's Address _____

Organizer's Phone _____   Organizer's Email _____

▪ Brief Description

_____

_____

▪ Doors *typically open 15 min before/after event Start time.*

▪ Recurring Event? ☐ No ☐ Weekly ☐ Monthly ☐ Other | **END DATE** of Recurring Event _____ |

If weekly, which days? ☐ M ☐ T ☐ W ☐ Th ☐ F ☐ Sa ☐ S

List dates that are exempt from the recurring schedule _____

▪ Requested Rooms

☐ Board Room	☐ Chapel (no kitchen)	☐ Staff Kitchen	☐ Classroom 8
☐ Hospitality Area (no kitchen)	☐ Main Kitchen	☐ Sanctuary	☐ Prayer Room (S)
☐ Youth Room	☐ Multi-Purpose (Full)	☐ Multi-Purpose (N 1/2)	☐ Multi-Purpose (S 1/2)
☐ Other			

▪ Food

Will food be served? ☐ Y ☐ N ☐ Hot ☐ Cold ☐ Potluck ☐ Catered   Other _____

Catering Company _____   Caterer Contact (Name/Phone) _____

Beverages served? ☐ Y ☐ N   Beverages Provided by: ☐ Event Host ☐ McKernan

▪ Sound System (Fee based on level of need)

A/V Required?   Y ☐   N   Purpose of Sound System (eg. music, video, audio, etc.)

_____

_____

▪ Requested Resources

Projection Equipment	☐ Screen Projector	☐ TV Cart + DVD Player	☐ Computer
Sound Equipment	☐ Mic(s) No. ____	☐ Mic Stand No. ____	☐ Lapel Microphone
Miscellaneous	☐ Flip Chart ☐ White Board	☐ Podium	☐ Wood Dividers

Special Needs or Other Requests _____

ACKNOWLEDGMENT

Bookings are not approved without a security deposit.

==*I have read and agree to the Terms & Conditions cited in this guide*==

*I understand that the space I'm using will be returned
to its original state, including the placing of furniture.*

_____

Accepted by *(Event Organizer)*

Security Deposits are due withing 24 hours of your application being approved.

Payment options include cash, cheque (made out to "McKernan Baptist Church"),
or debit/credit during office hours, Mon – Fri, 8:30am – 4:30pm.

OFFICE USE ONLY

Security Deposit $ _____

Security Deposit $ _____

Security Deposit $ _____

Total Security Deposit $ _____   DATE PAID _____   Rec'd By _____

Min Rate (5 hr) $ _____ + ____ hrs (@ _____ = $ _____)   **Total Rental Rate** _____

Min Rate (5 hr) $ _____ + ____ hrs (@ _____ = $ _____)   **Total Rental Rate** _____

Min Rate (5 hr) $ _____ + ____ hrs (@ _____ = $ _____)   **Total Rental Rate** _____

DATE PAID _____

DATE PAID _____   Rec'd By _____

Sound Person _____   A/V Fee $ _____

_____   _____

Approved By (Facility Manager)   Date