Activity Request Form

Broken Arrow Church of the Nazarene 401 W. New Orleans, Broken Arrow, OK 74011

Phone: (918)455-3550 Fax: (918)451-9227 <u>www.banazarene.org</u>

Use this form to request a calendar date and/or use of the facility. Date/usage will be confirmed only after this form has been completed, returned to the church office, and signed by an authorized church representative. No event will appear on the official church calendar until it has been approved as outlined above. Online: Complete the fields on this digital PDF, and return form to info@banazarene.org

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Name of Group / Pe	rson Making F	Request:			
Contact Person:			Home Phone	Home Phone:	
Address:			Work Phone:	Work Phone:	
Email Address:			Cell Phone:	Cell Phone:	
Activity:			Location of A	ctivity If Other Than Church:	
Date(s) of Activity:			Start Time(s):		
Day(s) of Week:			End Time(s):		
Is This Activity:	One Time	Weekly	Monthly	Other:	
Area(s) Requested:				Equipment Requested:	
Sanctuary			Foyer	State Quantity & Type	
FLC Gym			FLC Kitchen	Chairs	
Fellowship Hall (Includes Kitchen)			Teen Room (2nd Floor FLC)	Tables	
Class Room(s): (Specify Room #'s)			Cafe Area	Will you need a sound system? (\$60 sound tech fee)	
Sports Field(s): (Specify Field #'s)					
Signature of Person	Making Requ	est:		Date:	
For Office Use Only	: Appro	ved	Denied	Date:	
Comments:					
Signature of Church Represntative:				Date:	