First Presbyterian Church

700 Park Avenue, Florence, SC Phone: 843-662-2583 Fax: 843-662-1726 www.florencefirst.org

REQUEST FOR USE OF FACILITIES

Dates(s) of Event:				
Room(s) Requested:				
	time for set up and clean up)	Start:	End:	
Actual Time of Even	nt to be Announced on Church Cale	ndars:		
Estimated Number Attendii	ng:			
Purpose of Event:				
Church Related Event?				
Church Equipment & Suppli	ies Requested:			
Table & Chair Configuration	n: (Attach diagram if necessary)			
* Note: Groups may use th promote a business.	ne facility as long as their purpose is	not to raise money, pr	omote a political purpose, or	
** I acknowledge the receip church property.	pt of, and understand and agree to	comply with the policie	es and procedures for the use of	
Group Making Request:				
Person Responsible:	Member of First Presbyterian?			
Phone:	Email:			
Address:				
Signature:	Date:			
**A \$100 dep	osit is due to the church office upon ap se email completed form to			
	For Office (Use Only		
Total Fee Charged:	Deposit Collected:	Total Amou	nt Collected:	
Key Out:	Key In:			
Event scheduled on Church	Calendar: A	Application Approved:		