Fairwood Community United Methodist Church

15255 SE Fairwood Boulevard

Renton, WA 98058 Telephone: 425-228-4577

Email: office@fairwoodumc.org

FACILITIES REQUEST FORM

Organizatio	on Name		Date	Date Submitted		
Person Making Request				Non-Profit Group? Yes No		
Contact pe	erson, if different		Cont	Contact's Email		
Address						
Home or C	cell Phone		Work	Phone		
Date	Room Requested	Day of Week	Setup/Cleanup Time (How long do you need the space?)	Event Start/End Time (Actual time of your event)	Number of People Expected	
			. ,			
Space for mo	ore dates on back of form	1		I	I	
•			atawa a wiinna tian af waa an w	. 4:		
Please pay	/ usage donation up	-	ator's confirmation of reserva			
		S	Sound system needed? Yes	s No	-	
Comments	or other requests:					
D /N	atura of NA ations					
Purpose/N	ature of Meeting:					
•	•		st read the Youth and Childr org and by the main entrance		•	
	ou by request.		- g		, , , , , , , , , , , , , , , , , , , 	
I have rea	ad and agree to follo	ow the guidelines sta	ated in the Youth and Childre	en Safe Church Polic	cy. Yes	
Signature						
Approval w	vill be provided with	in 24 hours of reque	PS <i>t.</i>			
		For Office	e Use Only – APPROVAL ST	ATUS		
Approved by			Date	Date		
Denied by			Date	Date		
Donation amount \$			Paid	Paid Date		