

REQUEST FOR USE OF FACILITIES

THE FIRST PRESBYTERIAN CHURCH
617 MAIN STREET
IRWIN, PENNSYLVANIA 15642
724-863-5910 office@firstpresbyirwin.org

DATE OF REQUEST _____

NAME OF ORGANIZATION _____

NAME OF CONTACT PERSON _____

PHONE NUMBER _____

FACILITIES NEEDED: (Please indicate the room/rooms, etc. being requested.)

HOW ARE THE FACILITIES TO BE SET UP? _____

(Please draw set-up on the back of this paper, if needed.)

EQUIPMENT NEEDED _____

ARE KITCHEN FACILITIES REQUESTED? _____

TYPE OF ACTIVITY _____

DATE OF EVENT _____

TIME: FROM _____ TO _____

ARE YOU ABLE TO RESTORE THE ROOM TO ITS ORIGINAL SET-UP? _____



OFFICE USE ONLY

THIS REQUEST IS CLEARED WITH THE CHURCH CALENDAR _____

THIS REQUEST IS HEREBY DENIED _____

THIS REQUEST IS APPROVED _____ DATE _____
(Property Committee Chairperson)

USE OF KITCHEN FACILITIES APPROVED _____

FEE TO BE CHARGED _____

CONTACTED _____ BY _____