

UUFC FUNCTION/MEMBER FACILITY RESERVATION REQUEST

PLEASE RETURN THE COMPLETED FORM(S) TO THE CHURCH OPERATIONS MANAGER'S BOX OR OFFICE@UUCORVALLS.ORG

<p>1. Today's date: _____</p> <p>2. Person making the request:</p> <p>Your name _____</p> <p>Your e-mail _____</p> <p>Your phone _____</p> <p>3. Title or description of activity/meeting</p> <p>_____</p> <p>_____</p> <p>4. What is the day and date of the activity/meeting? (Or, if recurring, when is the first meeting day & date?)</p> <p>Day _____ Date _____</p> <p>5. When are you scheduling this activity/meeting?</p> <p>begin session at _____ begin set-up at _____</p> <p>end session at _____ end cleanup at _____</p>	<p align="center">FOR RECURRING MEETINGS</p> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 10px; writing-mode: vertical-rl; transform: rotate(180deg); font-size: small;">Check Season(s)</div> <div style="font-size: small;"> <input type="radio"/> Fall/Winter (Sep-Dec) <input type="radio"/> Winter/Spring (Jan-May) <input type="radio"/> Church Year (Sep-May or Jun) <input type="radio"/> Summer (Jun-Aug) </div> </div> <p>Note:</p> <p>Reservations may be made for the entire Church Year or for the entire Summer. Not for both.</p> <p align="center"><u>Please re-assess for Summer or Church Year sessions and re-apply. Thank you.</u></p> <p>A. This activity meets WEEKLY on (days of week) <input type="checkbox"/>Sun <input type="checkbox"/>Mon <input type="checkbox"/>Tue <input type="checkbox"/>Wed <input type="checkbox"/>Thu <input type="checkbox"/>Fri <input type="checkbox"/>Sat</p> <p>B. This activity meets MONTHLY on ... (weeks of the month/days of the week)</p> <p>Weeks: <input type="checkbox"/>1st <input type="checkbox"/>2nd <input type="checkbox"/>3rd <input type="checkbox"/>4th <input type="checkbox"/>5th</p> <p>Days: <input type="checkbox"/>Sun <input type="checkbox"/>Mon <input type="checkbox"/>Tue <input type="checkbox"/>Wed <input type="checkbox"/>Thu <input type="checkbox"/>Fri <input type="checkbox"/>Sat</p> <p>C. This recurring meeting will end</p> <p>On this date _____ (no forever or indefinite meetings please)</p> <p>D. This recurring meeting will meet weekly or monthly</p> <p>EXCEPT FOR THE FOLLOWING DATES: _____</p>
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What room(s) do you want to use? Please check the appropriate boxes below.
 If you are offering childcare, please reserve a room for it.

Sanctuary/Fellowship Hall (SFH)		(Rooms 4/5 Infant/Toddler) Dr. Seuss/Beatrix Potter (4/5)
Social Hall (SH)	<input type="checkbox"/>	Room 6A (6A) <input type="checkbox"/> *Room 6B (6B) <input type="checkbox"/> Room 6C (6C) <input type="checkbox"/>
Kitchen (K)	<input type="checkbox"/>	(Rooms 6ABC 3-part room) PT Barnum 3 Ring Circus (3RING)
Social Hall Deck (SHD)	<input type="checkbox"/>	(Room 7 downstairs-soft chairs/couches) Ralph Waldo Emerson (7)
Rita McDonald Library (LIB)	<input type="checkbox"/>	(Room 8 downstairs-tables) Susan B. Anthony (8)
Other Space OR Off Site (OFF) Specify Below	<input type="checkbox"/>	RE Kitchen (REKIT)
	<input type="checkbox"/>	(Room 9 upstairs-soft chairs/couches) Clara Barton (9)
	<input type="checkbox"/>	(Room 10 upstairs-tables) Christopher Reeve (10)
	<input type="checkbox"/>	Mezzanine (upstairs between Rooms 9 & 10) (MEZZ)
Equipment Use/Maintenance—must pre-arrange (If maintenance please describe below & list rooms)	<input type="checkbox"/>	TV/DVD Player <input type="checkbox"/> Computer Projector (PROJ1 or PROJ2) <input type="checkbox"/>

Comments or Description of Activity: