



Ricky D. Turner, D. Min, Sr. Pastor
Church Utilization Form

To Be Filled Out By Department Chairperson/Presidents Only

Ministry: _____ Chairperson: _____

Date of Event: _____ Time: From ____:____AM/PM To ____:____AM/PM

Number of Attendees: _____ Date of Set Up _____

I WILL BE USING THE:

Sanctuary ____ (Yes) ____ (No) Life Center ____ (Yes) ____ (No) Kitchen ____ (Yes) ____ (No)

Classroom ____ (Yes) ____ (No) Youth Church ____ (Yes) ____ (No) Youth Area _____

(You are responsible for cleaning the kitchen & removal of trash. No food is served in any room outside of the Family Life Center per Pastor.)

To Be Catered By: (Bro. Cade _____ Food Furnished By Your Ministry _____ Caterer _____

Name of Caterer: _____ Phone # _____ Cell# _____

Address (Include City, State & Zip) _____

List Menu (If Needed) _____

The Following Items Will Be Needed From the Culinary/Decorating

- | | |
|----------|-----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |
| 9. _____ | 10. _____ |

SET UP FOR THE LIFE-CENTER/OTHER

Tables needed: _____ Round: _____ Long: _____ Chairs: _____ Stage seating: _____

AUDIO EQUIPMENT WILL BE NEEDED

1. Microphone _____ 2. Podium _____ 3. Music _____ 4. VCR/DVD Player _____

4. Portable Stage: _____ 6. Overhead Projector & Screen: _____ 7. Security: _____

8. Other _____ 9. Do you Need your Event Taped: _____

PLEASE TURN IN TO ADMINISTRATION OFFICE:

Office Copy To: Bro. Cade (Business Manager) _____ Dea. Jones (Facility) _____

Maintenance (Set- up & Clean up) _____ Media _____ Dea. Donnell _____

Security _____

APPROVED BY: PASTOR RICKY D. TURNER YES NO (DATE) _____

MUST BE TURNED IN WITHIN 30 DAYS PRIOR TO YOUR EVENT