

Church Sponsored Reservation Form

First Christian Church ~ Council Bluffs, Iowa

Name of Group _____ Event: _____

Beginning Event Date _____ Ending Event Date _____ Number of People Expected: _____

Event Day of the Week _____

Time of Event: From _____ To _____ Set-Up Time Needed: From _____

Contact Person _____ Phone Number _____

E-Mail Confirmation Address: _____

Type of Use: Reception Meeting Dinner Overnight Event Other _____

Info for *Connection Calendar*

Area(s) Needed (Fill in Below):

EC Wing

Early Childhood Upper Level

- EC – Senior Adult Center (114)
- EC1 – Early Childhood – 2-Yr-Olds (125)
- EC2 – Early Childhood – Walkers (129)
- EC3 – Early Childhood – 3-Yr-Olds (130)
- EC4 – Early Childhood – Pre-school (133)

Other Upper Level

- Fireside Room (157)
- Heritage Chapel (102)

Outside Areas-Orchard or Heritage

Vehicle(s) Needed: _____

C Wing

Children's Lower Level

- C1 – Children's Classroom (027A)
- C2 – Children's Classroom (027)
- C3 – 1st Grade/Kindergarten (025)
- C4 – Grades 2-5 (023)

Other Lower Level

- Nursery (005)
- Worship Center (013)
- Kitchen* (014)

*Name of Person Trained for Kitchen Use: _____

Name of Driver(s) _____

A Wing

Adult Lower Level

- A – Small Classroom (030)
- A – Prayer Chapel (033)
- A1 – Adult Classroom (034)
- A2 – Adult Classroom (035)
- A3 – Adult Classroom (036)
- A4 – Adult Classroom (037)
- A – Student Center (039)
- A – Student Center Loft (039)

General Building Use Notes:

- ~ Events are not official until they are put on the church calendar and authorized by the Administrative Pastor.
- ~ Approval of kitchen use is always pending until name of trained kitchen personnel who will be present is turned in to office.
- ~ Your group is responsible for setting up for your event and when done, putting things back as you found them.
- ~ If sound, video, or janitor is needed, contact Director of Facilities (Dave Atchley/328-2606) after confirmation of approval.

For Office Use Only

Authorization: _____ Date _____

Inter-Office Use:

_____ Date Received

_____ Date Cleared on Calendar

_____ Placed on Electronic Calendar

_____ Copy Given to Facilities Director

_____ E-mail Confirmation Sent

_____ Copy given to _____

_____ Copy given to _____

(Updated 09/08/11-White)