



FALLS CHURCH PRESBYTERIAN

APPLICATION FOR USE OF FACILITIES

1. Today's Date _____
2. Organization _____
3. Applicant Name _____
4. Street Address _____
5. City / State / Zip _____
6. Mobile Phone _____
7. E-Mail _____
8. Person in Charge (if other than applicant):
Name _____
Mobile Phone _____
10. Date(s) of Use _____
11. Event Type _____
12. Time Rental Begins* _____
13. Time Rental Ends* _____
14. Total Rental Hours _____
15. Time Event Begins _____

**Include setup and cleanup time*

Note: Sexton coverage begins 15 minutes before Time Rental Begins and ends 15 minutes after Time Rental Ends.

Event Details

16. Number of Attendees _____
17. User Type ☐ Nonprofit ☐ Community Partner
☐ For Profit ☐ FCPC Member
18. Will User Collect Fees or Tuition for Event? ☐ YES ☐ NO
IF YES, Amount Collected per Person _____
19. Space Requested (*Maximum Occupancy)

Lower Level

- ☐ Room 22 (*15)
- ☐ Room 53 (*25)
- ☐ Room 54 (*30)
- ☐ Memorial Hall (*200)

Main Floor

- ☐ Conference Room (*15) ☐ Parlor (*20)
- ☐ Library (*20) ☐ Sanctuary (*400)
- ☐ Fellowship Hall (*200) ☐ Fellowship Hall Loft (*100)
- ☐ Fellowship Hall w/Kitchen

Second Floor

- ☐ Unavailable at this time

Third Floor

- ☐ Room 301 (*30) ☐ Room 303 (*25)
- ☐ Room 308 (*20) ☐ All Third Floor (*75)

Parking Lot/Grounds

- ☐ Parking Lot/Grounds only

20. Room Setup Needed? YES ☐ NO ☐

21. Setup Details (enter quantity where applicable)

- ☐ Round Tables _____
- ☐ Rectangular Tables _____
- ☐ Chairs _____
- ☐ TV/Monitor _____
- ☐ White Board _____

22. Additional information

Office Use Only