

# First Baptist Owasso Calendar Request

## CONTACT INFORMATION

Your Name:  Phone  Email:

## EVENT INFORMATION

Event Name:  Ministry or Organization:

Additional Information:

START DATE:  END DATE:  SETUP START TIME:

START TIME:  END TIME:  CLEAN UP END TIME:

Expected Attendance:

## RESOURCES

Will your event use SOUND, LIGHTS, VIDEO or COMPUTERS?

Are you requesting church provided Childcare?

Are you requesting assistance with food from the Church Hostess?

Are you requesting assistance from the Facilities Staff with set up?

### ROOM SETUP

- Leave room as is
- Additional set up required (see below)

### LOANER TABLES FOR NON-CHURCH EVENTS

How many tables?

## VEHICLES

- People Mover
- BRV People Mover
- Church Truck
- Open Green Trailer
- White Trailer

Please describe set up for your event :

Special Instructions:

**LOCATION**

OFF CAMPUS

Off Campus Location:

**Main Building**

<input type="checkbox"/> Worship Center	<input type="checkbox"/> Main Foyer	<b>Student Area</b>
<input type="checkbox"/> Fellowship Hall	<input type="checkbox"/> theCompass	<input type="checkbox"/> Terminal
<input type="checkbox"/> Kitchen		<input type="checkbox"/> Hangar
<input type="checkbox"/> 301	<input type="checkbox"/> 303	<input type="checkbox"/> Jetway
<input type="checkbox"/> 302	<input type="checkbox"/> 304	

**Adult Ed First Floor**

<input type="checkbox"/> 700	<input type="checkbox"/> 708
<input type="checkbox"/> 701	<input type="checkbox"/> 709
<input type="checkbox"/> 702	<input type="checkbox"/> 710
<input type="checkbox"/> 703	<input type="checkbox"/> 711
<input type="checkbox"/> 704 - K	<input type="checkbox"/> 712
<input type="checkbox"/> 705	<input type="checkbox"/> 713
<input type="checkbox"/> 706	<input type="checkbox"/> Gallery
<input type="checkbox"/> 707	

**Adult Ed Second Floor**

<input type="checkbox"/> 800	<input type="checkbox"/> 808 - O
<input type="checkbox"/> 817	<input type="checkbox"/> 809 - W
<input type="checkbox"/> 818	<input type="checkbox"/> 810 - O
<input type="checkbox"/> 801 - O	<input type="checkbox"/> 811 - K
<input type="checkbox"/> 802 - O	<input type="checkbox"/> 812 - O
<input type="checkbox"/> 803 - O	<input type="checkbox"/> 813 - O
<input type="checkbox"/> 804 - O	<input type="checkbox"/> 814 - O
<input type="checkbox"/> 805 - O	<input type="checkbox"/> 815 - O
<input type="checkbox"/> 806 - O	<input type="checkbox"/> 816 - O
<input type="checkbox"/> 807 - O	

**Children's Area**

<input type="checkbox"/> 100	<input type="checkbox"/> 106	<input type="checkbox"/> 200 - CL2	<input type="checkbox"/> 206
<input type="checkbox"/> 101	<input type="checkbox"/> 107	<input type="checkbox"/> 201	<input type="checkbox"/> 300
<input type="checkbox"/> 102	<input type="checkbox"/> 108 - W	<input type="checkbox"/> 202	<input type="checkbox"/> Kidzone 1
<input type="checkbox"/> 103	<input type="checkbox"/> 109 - CL1	<input type="checkbox"/> 203	<input type="checkbox"/> Kidzone 2
<input type="checkbox"/> 104	<input type="checkbox"/> 110	<input type="checkbox"/> 204	
<input type="checkbox"/> 105	<input type="checkbox"/> 111	<input type="checkbox"/> 205	

**Preschool Area**

<input type="checkbox"/> 500 - K	<input type="checkbox"/> 508	<input type="checkbox"/> 516	<input type="checkbox"/> 607
<input type="checkbox"/> 501	<input type="checkbox"/> 509	<input type="checkbox"/> 517	<input type="checkbox"/> 608
<input type="checkbox"/> 502	<input type="checkbox"/> 510	<input type="checkbox"/> 602	
<input type="checkbox"/> 503	<input type="checkbox"/> 511	<input type="checkbox"/> 603	
<input type="checkbox"/> 504	<input type="checkbox"/> 512	<input type="checkbox"/> 604	
<input type="checkbox"/> 505	<input type="checkbox"/> 513	<input type="checkbox"/> 605	
<input type="checkbox"/> 506	<input type="checkbox"/> 515	<input type="checkbox"/> 606	

**OUTDOOR EVENT**

What on campus outdoor areas do you plan to use?

In the event of inclement weather what is your plan?

**APPROVAL INFORMATION**

Requested by:

Date:

Authorized by:

Date:

Administrator Approval:

Date:

Amount of Payment or Deposit Received:

Date: