

3131 North Meade Street Appleton, WI 54911 920-832-1310

ID#: 73-55-100

CHURCH FACILITIES RESERVATION FORM

(The usage of church facilities within this reservation is for church members only)

Legal & Hmong Name (Person in charge of the event): $_$				
Address:	City:	State	e:	Zip:
Contact Phone Number: ()	Contact Email: _			
Event Date(s):/ Start time of o	event:	End time o	of event: _	
☐ Invitation only ☐ All day (wedding only)	□ AM: 6an	n-2pm	OR	l PM: 3pm-9pm
Type/Description of Event:				
Estimated number of attendees:	Serving Foo	od/Beverage	□ Yes	□ No
FACILITIES/EQUIPMENT REQUESTED (PI	ease check all that apply)		
☐ Kitchen ☐ Stove ☐ Gym ☐ Chapel/Sanct	uary 🔲 Backyard	☐ Sound	System	
☐ Other (Please specify):				
Please complete and return this form to the church's Ad donation of \$300 is appreciated for all-day events and \$1			weeks befo	ore the event. A
All church equipment, kitchen items, and furniture must be taking the trash out and mopping the gym and kitchen floor		belong. Please	clean up a	after the event by
For Saturday reservations, the kitchen can be used on Friday setup is not allowed in the gym prior to 8:30 p.m. on Friday				
Signature of Person in charge of the event		Date Sign	and .	
Signature of reison in charge of the event		Date Sign	icu	
Signature of Living Stone Alliance Church Admin As	 sistant	Date Sign	 ned	