



# St. Stephen Church HARDIN COUNTY Facility Request & Reservation Form

Completion of this form serves as a request ONLY to reserve space for an activity or event at St. Stephen Church. You will be contacted upon receipt of your request to finalize your reservation. There is a **NON-REFUNDABLE** deposit due upon reservation. Please complete this form in its entirety to avoid delays in processing your request and submit to the front desk!

DATE OF REQUEST _____	EVENT DATE (S) _____
	<i>Please circle the event day(s):</i>
	M      T      W      Th      F      Sa      Su

*Please indicate three alternate dates for this activity/event in the event of scheduling conflict:*

\_\_\_\_\_

Your Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Nature of activity/event: \_\_\_\_\_

Is this a church/ministry related activity/event?    YES                       NO

If so, Ministry /Group Name: \_\_\_\_\_

**ALL MINISTRY RELATED  
ACTIVITIES/EVENTS MUST FIRST  
BE APPROVED BY CHURCH  
ADMINISTRATION, PRIOR TO  
BEING ADDED TO THE CALENDAR.**

**Space Requested: Check All that Apply**

Sanctuary		
Classrooms (Specify _____)		
Other (Specify _____)		

**IS THIS A TICKETED EVENT?**                      YES                       NO

Set-up Time \_\_\_\_\_                      Event Start Time \_\_\_\_\_                      Event End Time \_\_\_\_\_

Number expected in attendance: \_\_\_\_\_                      Number of Tables \_\_\_\_\_                      Number of Chairs \_\_\_\_\_

Will there be a need for any of the following? Please circle all that apply:

**\* AUDIO VISUAL SERVICES**

**\* MUSIC DEPARTMENT**

**\*KITCHEN**

**\*Note: These are additional services and separate arrangements,  
as well as additional costs are required!**

For Audio Visual needs, complete the AV Request Form and submit at the Front Desk of the Family Life Center.

For musicians, choir, soloists, etc, contact Minister Kevin James at (502) 583-6798 ext 6656

For use of kitchen, please provide name of licensed caterer with phone number here: \_\_\_\_\_

Upon completion of your activity/event, if room is left in acceptable condition, deposit will be refunded or applied toward final bill. Please allow 4-6 weeks for processing of all refunds.

Please draw a diagram, of set-up desired, below. We will make every effort to comply with your request. Thank You!  
QUESTIONS? Call (502) 583-6798 ext 1035.

# APPROVAL

\_\_\_\_\_  
Church Administration Signature

\_\_\_\_\_  
Date

# DIAGRAM



# PAYMENTS

Date	Description	Signature