

**REQUEST for USAGE of Facilities  
St. John's United Methodist Church  
7372 Marine Road, Edwardsville, Illinois 62025**

The following requested information will help the St. John's UMC Board of Trustees (BOT) approve the usage of our Church Facilities.

**ALL THREE STEPS must be completed and signed before the activity can be conducted.**

The Methodist Book of Discipline along with our St. John's UMC Operational Manual will be two of the guides used by the BOT to determine approval of the function. If warranted, we will review the request with our Insurance Company (Church Mutual).

**Step I - To be completed by the requesting Group – Organization – Person.**

A – Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State

E-Mail: \_\_\_\_\_

B – Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Responsible Party/Contact Person

Address: \_\_\_\_\_  
Street City State

E-Mail: \_\_\_\_\_

C – Name of Event/Function: \_\_\_\_\_

\_\_\_\_\_

D – Dates and Times Requested: \_\_\_\_\_

\_\_\_\_\_

E – Space/Room Numbers Requested for Usage: \_\_\_\_\_

\_\_\_\_\_

Note: If areas outside the building are required for other than parking, please explain:

\_\_\_\_\_

F – Approximate number of People Using: \_\_\_\_\_

G – Will rooms require change of configuration (Say Furniture etc)? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes explain: \_\_\_\_\_

\_\_\_\_\_

H – Detailed explanation of activity to be conducted, including arrangements for adequate supervision, if required: (If additional space is needed, please attach a separate sheet.)

\_\_\_\_\_

\_\_\_\_\_

I – Equipment Needs? For example, audiovisual, organ, piano, sound system? Please explain:

\_\_\_\_\_  
\_\_\_\_\_

J – Church Member: Yes \_\_\_\_\_ No \_\_\_\_\_ Church Organization: Yes \_\_\_\_\_ No \_\_\_\_\_

K – Organization FOR Profit: Yes \_\_\_\_\_ No \_\_\_\_\_ NOT for Profit: Yes \_\_\_\_\_ No \_\_\_\_\_

L – Does the Requesting Organization carry Liability Insurance with Limits of at least \$1,000,000  
Yes \_\_\_\_\_ No \_\_\_\_\_.

M – If the answer to (L) is Yes, will the Requesting Organization Insurance Policy cover Additional  
Speakers – Entertainment Groups – Equipment - etc. that may be used to supplement the event when  
they contract/agree to have additional support? Yes \_\_\_\_\_ No \_\_\_\_\_

Please explain: \_\_\_\_\_

\_\_\_\_\_

Note: When submitting this request, the answers to some of the above questions will require additional forms to be completed. Our Church Office representative will be able to provide you with that information after review of information submitted in Step I. If additional space required for an explanation please, attach a paper and refer to the Document Number/Step/Letter indicated on this form.

\_\_\_\_\_  
Signature of Requesting Person

\_\_\_\_\_  
Date

**Step II**

**For use by Church Office**

N - Received Request with support documentation: \_\_\_\_\_  
Name Date

Note: Document # assigned by office.

O – Review with Pastor. The following additional forms/information were given to Requesting Group for their completion: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

P - Checked church calendar and **TENTATIVELY** scheduled for requested time period.

Q – Forwarded all information/forms to BOT for approval: \_\_\_\_\_  
Date

**Step III**

**Completed by BOT**