

## Ministry Activity + Facility Usage Form

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**Ministry Name:**

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**Activity Description:**

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**Date(s) + Times Requested:**

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**Has the Overseer approved this activity?**

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**Frequency Of Need:**

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**Day Needed:**

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**Location Requested:**

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**Estimated Attendees**

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**Will Any Food Or Drink Be Served?**

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**Is Sound Needed (i.e. Will a microphone be needed?)**

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**Special Equipment Requested:**

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**Ministry Representative:**

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**Phone**

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**Email**

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**Date/Time**

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**Signature**

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