



NORTHLAKE UNITARIAN UNIVERSALIST CHURCH
ROOM USE REQUEST FORM
 For Members, ELWAS, and ATK

Name of Individual, Group, or Committee: _____

Contact Name and Phone Number: _____

Description of Event: _____
(i.e., committee meeting, memorial service, fundraiser, etc.)

Date(s) and Time of Event: _____
 OR if this is a recurring event, please list day *(i.e., 2nd Monday of each month, every Thursday, etc.)*

Room Requested:

- | | | | | | |
|------------|--------------------------|---------------|--------------------------|------------|--------------------------|
| Sanctuary | <input type="checkbox"/> | Church Office | <input type="checkbox"/> | Board Room | <input type="checkbox"/> |
| Adams Hall | <input type="checkbox"/> | Classroom | <input type="checkbox"/> | | |

Please note that filling out this Request does not guarantee the space for your event. You will be contacted by the office. Thank you for taking the time to fill out this Request, as it helps the office track use of Northlake's building use.

For Office Use Only

Damage Deposit or Cleaning Fee Required? Yes No If yes, amount _____

Use Approved? Yes No

Date contact notified _____



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