Grace Ministries Building Use Form Single Event

 Submit the For Upon approval E mail confirm Please notify the 	the Building Use Form to either the GC of your request you ation or a copy of the GCC Office in the GCC Office in the second control of the second control		Description of your event:				
cancellation.			Expected	Expected Number of People			
Date Submitted:		Submitted by:					
Person Responsible(s) for the Event: _						
Phone number:	E mail:						
Person Responsible(s) for the Event: _						
Phone number:		E m	ail:				
Room(s) Requested Gym/Sanctuary 201 207 Other:							
Activity	Day of Week	Set Up Time	Event Start	Time End	Clean up Time		
		(In)	SIMI	F/HG	(Out)		
Date(s)	of week	(===)	Start	2114	, ,		
Date(s)	of week	(===)	Suit	Zau			
Date(s)	of week	(==-)	Start				
Date(s)	OI WEEK	(===)	Start				
Date(s)	OI WEEK		Suit				
Date(s)	OI WEEK		Start				
Date(s)	OI WEEK		Suit				
Building Use Ap All events must first Approval GCA: GCC:	proval be reviewed by Go	CC and *GCA toDate:		lity and usage.			

Shut Down Procedures

- Please follow the steps listed below before leaving the building.
- Clean up the area used.
- Empty all garbage and dispose in dumpster.
- Ensure the room(s) are returned to normal set up.
- Turn off all lights.
- Close all windows.
- When leaving ensure all doors used are locked.

Any questions? Please contact:
Glen Bergersen at (414)422-0596 or E mail gbergersen@wi.rr.com
or
GCC Church office at (414)771-3020 E mail: office@ourgcc.com

Equipment needed (Chairs, tables, sound, etc.): _		