

BUILDING USE AND SET-UP FORM—PER EVENT

FIRST PRESBYTERIAN CHURCH
2300 S. WEST AVE., SIOUX FALLS, SD 57105
PHONE (605) 336-2886 FAX (605) 336-3787

★ **This form and an Assumption of Risk form are to be completed by individuals and/or groups requesting the use of the facilities of First Presbyterian Church and should be submitted to the Administrative Assistant.**

PLEASE INDICATE-- RECURRING EVENT _____ ONE TIME EVENT _____

EVENT TITLE _____

EVENT DATE(S) _____

TIMES Setup _____ Event Start _____ Event End _____

EVENT PURPOSE _____

ROOM(S) REQUESTED _____

SPONSORING GROUP _____

CONTACT PERSON(S) _____

PHONE #s Daytime _____ Evening _____

EMAIL _____

NUMBER OF PEOPLE EXPECTED Adults _____ Children _____

Will food be served? _____ Type of food (meal, snacks, etc) _____

Do you need someone to open and/or close the building? Yes _____ No _____

EQUIPMENT AND SET-UP INSTRUCTIONS ON THE BACK OF THE FORM

Any room fee and a certificate of insurance are due as soon as possible in order to place your event on the calendar.

If the event is an on-going situation, the rent is due once a month.

- **Use of the building is limited to rooms assigned**
- **No red colored beverages allowed at any time in the building**
- **Child care is not provided with any room rental**
- **If the kitchen has been used, sweep and (if necessary) wet mop the floor, appropriately clean and sanitize counter tops, sinks, and kitchen equipment, and put away all utensils, dishes, pots and pans that have been used.**
- **All facilities used during an event should be cleaned and left in good order upon completion of their use.**

If you have any changes, additional requests or instructions, please contact the Administrative Assistant in the Church Office.

CHURCH OFFICE USE ONLY	
Date Form Received _____	Received By _____
Date Distributed to Director of Facilities _____	Room Fee _____
Certificate of Insurance Required Yes _____ No _____	Assumption of Risk Form Received Yes _____ No _____

EQUIPMENT

Chairs -- Quantity needed _____

Tables -- Round (seats 8) -- Quantity needed _____

8' rectangle (seats 8 both sides or 4 one side) -- Quantity needed _____

5' rectangle (used for registration, display, etc) -- Quantity needed _____

Specific Set-Up Instructions

- ___ Classroom Style--Tables in rows, chairs on one side only
- ___ Theater Style--Rows of chairs facing stage, podium, board, etc
- ___ Board Room--Square of tables with chairs facing the center
- ___ U shape--3 sided with opening facing board, podium, etc
- ___ Other (draw diagram below)

MEDIA EQUIPMENT

Television/VCR/DVD	Yes _____	No _____
Overhead Projector	Yes _____	No _____
PowerPoint Projector (laptop required)	Yes _____	No _____
Extension Cord(s)	Yes _____	No _____
Portable Sound System	Yes _____	No _____
(includes freestanding speaker, microphone, soundboard)		
Operator for the Sound Board (Sanctuary only)	Yes _____	No _____

ADDITIONAL EQUIPMENT

Podium	Yes _____	No _____	Stage	Yes _____	No _____
Screen	Yes _____	No _____	Piano (upright)	Yes _____	No _____
White Board	Yes _____	No _____	Grand Piano (Sanctuary only)	Yes _____	No _____
Easel (wooden)	Yes _____	No _____	Music Stands	Yes _____	No _____

Specific Arrangement Instructions

DRAW DIAGRAM OF SET-UP, ACCORDING TO THE ROOM LAY-OUT, IF NEEDED