

EQUIPMENT USE AND SERVICE REQUEST

FRANKLIN BAPTIST ASSOCIATION
PO Box 310, Union, MO 63084 636-583-2639
fcbamo@aol.com

Date(s) of Use: _____ Start Time: _____ End Time: _____

GROUP: _____

Purpose of Activity: _____

Sponsoring Church/Church Membership: _____

Approximate Number in Group: _____ Ages of Group: _____

Contact Person: _____

Address: _____

Main Contact Phone: _____ Cell or Other Phone: _____

E-mail Address: _____

EQUIPMENT AND SERVICES REQUESTED*

Bus _____ Projection Screen _____

Video Projector _____ Movie Film Projector _____ Slide Projector _____

PA System _____ Portable Speaker _____ Party Trailer _____ Bounce House _____

Snow Cone Machine _____ Popcorn Machine _____ Table Cloths _____

Electric Stapler _____ Spiral Binder _____ Other _____

Signature & Title

Date

Please list any special needs or requests on back of this sheet.

*FBA Churches and Ministries are not required to pay fees for use or services. However, deposits may be requested.

FOR OFFICE USE

Date Request Received _____

Deposit Fee _____

Rental/Use Fees/Donations _____

Deposit Received _____

Payment/Donation Received _____

Payments/Deposit Fee Return _____