

# ST. ANDREW'S BUILDING USE PERMIT

**PLEASE PRINT ALL INFORMATION / EXCEPT FOR YOUR SIGNATURE**

1. Organization/Group Name: \_\_\_\_\_
2. Organization/Group Purpose: \_\_\_\_\_
3. Organization/Group Size: \_\_\_\_\_
4. Organization/Group Age Range: \_\_\_\_\_
5. Equipment Needs (Furniture, projectors, etc.): \_\_\_\_\_
6. Special Needs (Toys, instruments, kitchen use, etc.): \_\_\_\_\_
7. Storage Requirements: \_\_\_\_\_
8. Time Requirements:
  - a. Start Date \_\_\_\_\_
  - b. End Date \_\_\_\_\_
  - c. Start Time \_\_\_\_\_
  - d. Day(s) of Week \_\_\_\_\_
9. Who will assist with:
  - a. Table covers/decorations \_\_\_\_\_
  - b. Clean Up \_\_\_\_\_
  - c. Food Intake \_\_\_\_\_
10. Room/Location requested:  
\_\_\_\_\_

Sexton's services include set up/breakdown of furniture only. Fee will be charged for any additional services requested by the group. Church shall be returned to the same condition as it was at beginning of use - except for breakdown by the Sexton.

**Group Leader Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Contact Address & Phone #** \_\_\_\_\_  
\_\_\_\_\_

This inquiry is designed to assist the development of a usage plan for the available church space. It is the desire of the Church Office to remain flexible enough to accommodate changes whenever possible and within reasonable limits. **Please notify us if your needs change after the request is approved.**

**Clergy Approval Signature:** \_\_\_\_\_

cc: Applicant  
Sexton  
Office (Original)