CHAPEL FACILITY RESERVATION REQUEST										
Data requested by this form, such as home phone number, is protected by the Privacy Act of 1974 as amended. Disclosure is voluntary, but nondisclosure can result in the chapel staff being unable to contact you if there are any questions concerning the request or if a situation arises following approval which will prohibit the use of the facility.							<i>i</i> ing			
Name of Activity/Group:							,	Today's Dat	e:	
Name of Requestor:				E-mail of Requestor:			stor:	Work Phone: Home Phone:		
Facility Requested										
Sunt	flower Chape	l (Bldg	124))	Prairie Rose Chapel (Bldg 20					
Sanctuary (Religious Activities Only) (So			(Se	eats 250)		Sancti	uary (Religious	Activities Only)	(Seats 224)	
Annex (S			(Se	(Seats 116)		Annex	((Seats 145)	
Nursery			(Se	(Seats 12)		Nurse	ry		(Seats 12)	
Kitchen *Requires Orientatio		ion*	1*		Kitchen *Requi		quires Orientat	uires Orientation*		
Check one of the following:										
One Time Use	Recurring:	Dai	ly	Weekly	М	onthly	Other:			
Start Date: Hours (Include set-up/tear-down)										
End Date:			Expected Att			Expected Atte	endance			
Additional Information/Requests (Supplies, Setup, Etc.):										
I have read and agree to the conditions set forth on the reverse of this facility reservation form.										
Facility Manager (Printed Name)				Facility Manager (gnature)	Date:		
NCOIC/Wing Chaplain (Printed Name)				NCOIC/Wing Chaplain (Signature)			Approved	d/Disapproved		

RESPONSIBILITES OF EVENT SPONSOR

- 1. I agree to leave the facilities and property of the chapel in the same order and condition as I have found them; ensuring equipment is left where found or returned to proper storage spaces. That facilities and property of the chapel are clean, neat, and trash is emptied prior to departure.
- 2. I understand that **NO** food and beverages are to be taken into the Chapel Sanctuary or Narthex (foyer) area.
- 3. I understand that altars are to be treated with respect and not used as a table or desk. If a table is required one will be available.
- 4. I understand that in order to utilize chapel equipment, I must make a request on this form prior to the scheduled activity.
- 5. If a key is requested, a form 1297 will be needed to be filled out. Keys are not to be lent out and distributed without chapel's notification. The person with the key is responsible for the facility usage.
- 6. Turn off all lights and all faucets in areas used by your event.
- 7. Secure all inside doors and windows in rooms used by your event.
- 8. Secure and check all building exit doors.
- 9. Permit no person in the building occupied by your event who is not a member of your group. **ALL MINOR DEPENDENTS MUST BE DIRECTLY SUPERVISED BY A RESPONSIBLE ADULT**.

* I have read and accept responsibilitie	es for items 1 to 9:	
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- 10. Smoking in the chapel is prohibited. The consumption of alcoholic beverages, except for use in religious rites, is strictly prohibited in the chapel facilities.
- 11. Leave furniture, equipment, etc., as it was originally found or return it to the proper storage area.
- 12. Leave the areas you use as clean as you found them. (This includes removing all objects, scraps or materials, and food.) Sweep and/or vacuum as necessary. (Cleaning equipment is located in the janitors closet)
- 13. Dishes used are to be cleaned and put in the proper location. If the dishwasher is used, dishes, etc., are to be taken out of the dishwasher and placed in the proper cabinet.
- 14. Supplies such as coffee, coffee filters, paper plates, paper cups, plastic spoons, knives, and forks for official chapel functions only.
- 15. All food refuse **MUST** be removed to the outside dumpster.
- 16. Notify the facility custodian or if unavailable, the Chaplain Duty Officer via the Command Post (747-6711), of any lock/key problems dealing with facility insecurity, or other concerns/problems, i.e., electrical power, heat or water failure that would appear to demand immediate attention.
- 17. Use only those facility areas approved in your request.
- 18. Chapel activities/programs have priority in use of chapel facilities/equipment. The requesting person/group/organization must—relinquish building/equipment use to chapel needs/requirements. Requester will be notified **ASAP** of any conflicts.
- 19. Facility usage must comply with Chaplain Corps DAFIs and local OIs.
- 20. Per AFOSH 91501 Ch. 6 make sure the facility is in a fire safe condition at the close of business.
- 21. Please allow five (5) working days to process your request. The facility reservation coordinator will notify you of approval or disapproval.

*I have read and accept responsibilities for items 10 to 22:

NOTE The Wing Chaplain reserves the right, based on the information you provide to us on the front page to determine the appropriateness of your request location. If determined to be in the interest of the overall program a space may be assigned other than what you have requested. If this should take place we will contact you, so please make sure you provide us a phone number in the space provided on front.

Groups scheduled for recurring programs who fail to use their space on date and time shown on front page will have their reservation canceled, unless the chapel is notified.