

*King of Glory Evangelical Lutheran Church*

6012 East River Road

Flushing, MI 48433

## BUILDING USAGE REQUEST FORM

Full Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Are you a Member of King of Glory? Yes \_\_\_\_\_ No \_\_\_\_\_

Date of Building Usage Being Requested \_\_\_\_\_

Day of Week Being Requested \_\_\_\_\_

Describe the Activity to be Held

\_\_\_\_\_  
\_\_\_\_\_

Activity Starting Time: \_\_\_\_\_ Activity Ending Time: \_\_\_\_\_

Estimated Number of Persons Attending Event \_\_\_\_\_

Do you have access (key) to unlock and lock the building?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Do you agree and give assurance to comply with any and all  
requirements and rules given to you by the church?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Please understand that this request to use the facility is not  
granted until you have been so advised by the church council  
president or another officer of the church.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_