**Individual or Organization Submitting Request**: Click here to enter text.

**Contact Person #1**: Click here to enter text.

Phone Number(s): Click here to enter text. Email: Click here to enter text.

Address: Click here to enter text.

**Contact Person #2** (optional): Click here to enter text.

Phone Number(s): Click here to enter text. Email: Click here to enter text.

Address: Click here to enter text.

Are you a member of Oakwood?
[ ]  Yes [ ]  No

If you are a church member, will you be using the facility for a church ministry or church activity?
[ ]  Yes [ ]  No

Who referred you to Oakwood Presbyterian Church or how did you hear about our facility?

**Activity/Event:** Click here to enter text. **Number of People Attending:** Click here to enter text.

Description: Click here to enter text.

Will money be collected in the form of admission, donations, or the sale of merchandise? [ ]  Yes [ ]  No
If yes, please describe: Click here to enter text.

**Day(s) and Time(s) of Facility Request:** (add additional sheet if needed.)

Date: Click here to enter a date. Time(s): Click here to enter text. Day: Click here to enter text.Frequency:

Date: Click here to enter a date. Time(s): Click here to enter text. Day: Click here to enter text.Frequency:

**Rooms Requested:**

Check the box for the areas or rooms requested:

[ ]  Large Classroom (13-40 people) Room 124/125

[ ]  Medium Classroom (7-12 people) Room 126

[ ]  Small Classroom (1-6 people)

[ ]  Kitchen (for serving only)

[ ]  Sanctuary (over 40 people or special use)

[ ]  Gathering space (only church-wide activities)

[ ]  Conference room (located in the Oakwood office)

[ ]  Lawn adjacent to building

[ ]  Other Click here to enter text.

**Equipment Requested:** (See page 3. User is responsible for setup, cleanup and return of equipment)

Folding Chairs (number needed): Click here to enter text.

Tables (number and type needed): Click here to enter text.

Sound system use (rental requires A/V staffing payment): [ ]  Yes [ ]  No

A/V equipment (List specific items needed or equipment needed): Click here to enter text.

Other (please explain): Click here to enter text.

**Storage Space Requested:** (limited availability, extra fees may apply.) Please describe items to be stored.

Click here to enter text.

**Name and contact information of officiating minister** (weddings and funerals)

Name: Click here to enter text.
Phone: Click here to enter text.
Address: Click here to enter text.
Email: Click here to enter text.

**I,** Click here to enter text.**, have received and read the Oakwood Presbyterian Facility Use Policy Statement and accept responsibility for meeting the requirements stated therein. I understand that I may not transfer these rights to any other individual, group, or organization. Oakwood Presbyterian Church reserves the right to reschedule or cancel in the event of unforeseen circumstances.**

Signature: Date: Click here to enter a date.

Return Application to:

**Oakwood Presbyterian Church**

**1865 Waddle Rd.**

**State College, PA 16803**

814-238-5442
churchoffice@oakwoodpca.org

Note: The person/organization may not sublet or transfer these rights or privileges to any other individual(s), group, or organization. Oakwood Presbyterian Church reserves the right to reschedule or cancel in the event of emergencies or unforeseen circumstances.

**OAKWOOD PRESBYTERIAN CHURCH USE ONLY**

Date application received: Click here to enter a date. Date application reviewed: Click here to enter a date.

Oakwood Presbyterian Church has

[ ]  APPROVED Click here to enter text.

[ ]  NOT APPROVED Click here to enter text.

[ ]  APPROVED WITH THE FOLLOWING QUALIFICATIONS Click here to enter text.

The use of the church facility as outlined in this application.

Fee for use of the property: Click here to enter text.

Oakwood Officer Signature Date: Click here to enter a date.

Name of Deacon giving notice to applicant: Click here to enter text.

By Click here to enter a date.(Date)

Comment/notes Click here to enter text.