

Ziegels Union Church Member Facility Use Request Form

Date submitted: _____

Event Title: _____

Event Purpose: _____

Organization Name (if applicable): _____

Contact Person Name: _____

Phone Number: _____

Email: _____

Date(s) requested: _____

Event Time(s) requested: _____

Set up Time requested: _____

Estimated number of participants: _____

Facility use requested (check all that apply)

☐ Kitchen ☐ Fellowship Room ☐ Grove ☐ Refreshment Stand ☐ Building Room

☐ Other, please specify: _____

Technology use needed (check all that apply)

☐ Podium ☐ Microphone ☐ PC Projection System

☐ Other, please specify: _____

☐ None

Additional needs/accommodations (please be specific):

Ziegels Union Committee Decision: ☐ Approve ☐ Deny **Date:** _____

Reason for denial: _____

Ziegels Union Committee Fee Decision: _____

Deposit received: \$ _____ **Date:** _____

Signature (Ziegels Union Committee Representative) _____

(revised 10/2025)