



# Room Request Form

<b>Your Name</b> _____	<b>Today's Date</b> _____
<b>Home Phone</b> _____	<b>Work Phone</b> _____
<b>Ministry</b> _____	<b>Meeting Name</b> _____
<b>Meeting Date</b> _____	<b>Meeting Type</b> _____
<b>Starting Time</b> _____	<b>Ending Time</b> _____

This is a standing Request (Y / N)    From / Every: \_\_\_\_\_    Until: \_\_\_\_\_

**Diagram of Room Setup**  
Please draw diagram with location & number of chairs, tables, special equipment, etc.

**Special Equipment Needs**

- |   |  |
|---|--|
| <input type="checkbox"/> Marker Board       | <input type="checkbox"/> Extension Cord(s)     |
| <input type="checkbox"/> Easel              | <input type="checkbox"/> Speaker Stand         |
| <input type="checkbox"/> Overhead Projector | <input type="checkbox"/> Other (Specify) _____ |

**For Office Use Only**

<input type="checkbox"/> Approved & Scheduled	Assigned To: _____
<input type="checkbox"/> Not Approved: Reason(s) _____	
Authorized Signature: _____	Date: _____