

FT Sill RELIGIOUS SUPPORT FACILITY RESERVATION AND REQUEST FORM (WEDDING)

EVENT INFORMATION: MUST BE FILLED OUT IN FULL

Company and Battalion using the building: _____

Date Submitted: _____ Date of Event: _____

Start Time: _____ End Time: _____

Estimated Attendance: _____

Rooms and equipment needed: Circle one and be Specific

Rooms:

Sanctuary Fellowship Hall Classroom (How Many)____ Kitchen Other (Specify)_____

Equipment:

Projector Screen Sound System Microphone (How many)_____

Bride and Groom Information

MUST BE FILLED OUT IN FULL

Bride: _____ Groom: _____

Cell #: _____ Cell #: _____

Work #: _____ Work #: _____

BRIDE OR GRROM READ AND INITIAL EACH STATEMENT BELOW:

_____ I understand that Chapel related activities/events have priority, and this may cause my event to be cancelled or rescheduled.

_____ Signing out a key is to be done 24 hours PRIOR to the event.

_____ I understand that I will provide all supplies needed for my event, the chapel is not responsible for this. (To include copy paper.....)

_____ I understand that I am responsible for cleaning after my event and I will provide a cleaning detail if needed

I have read the terms of this contract and agree to accomplish these procedures and abide by these conditions of use. I understand that this is a government facility and any deviation from the terms of this agreement or failure to accomplish said terms will result in forfeiture of use. For squadron/unit functions, Commanders will be notified of violations. I understand that I am solely responsible to enforce this policy by all users during the event I have reserved the facility for.

Signature of Responsible Party/Requestor

Today's Date

Sponsoring Chaplain Information

Chaplain: _____ Number: _____

Chaplain Assistant: _____ Number: _____

Signature of Chaplain

Signature of Chaplain Assistant

RESERVATION APPROVAL/DISAPPROVAL

No Reservation is approved and will not be put on the calendar until it is reviewed and signed by the Chapel NCOIC. No EXCEPTIONS

APPROVED / DISAPPROVED: Date _____

Date entered on Calendar: _____

SIGNATURE OF /NCOIC: _____ DATE: _____

Requestor was notified of confirmation on: _____.

By: _____.