

All Saints Lutheran Church ... Facility and Room Request Form

15915 Excelsior Boulevard, Minnetonka, MN 55345-5499

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Before submitting this request ... check master calendars for room / date conflict.

Date(s) of event:		Day(s) of week:	
Today's date:		Group name:	
Number of people attending:		Event name / title:	
Person(s) responsible:			
Telephone number(s):		Email: _____ @ _____	
Start time: _____ a.m. / p.m.	End time: _____ a.m. / p.m.	Set up by: _____ a.m. / p.m.	
Is this a standing request? If so:	(circle one) every day / week / month	through (end date):	
With exception(s) of:			

INDOOR ROOMS (check all that apply)

Report damage to church office. Please—submit request at least two weeks in advance.

Level 1 (main floor)	<input type="checkbox"/> Sanctuary	<input type="checkbox"/> Fellowship Hall	<input type="checkbox"/> Narthex	
	<input type="checkbox"/> Loaves Room	<input type="checkbox"/> E. Conf. Room	<input type="checkbox"/> Chapel	
	Rooms require additional consideration before use... →	<input type="checkbox"/> CCC Rooms	<input type="checkbox"/> Toddler/Infant	<input type="checkbox"/> Fishes Room
		<input type="checkbox"/> NS Rooms	<input type="checkbox"/> Kitchen	<input type="checkbox"/> Other _____
Level 2 (Library Level)	<input type="checkbox"/> Lounge	<input type="checkbox"/> Deborah Room	<input type="checkbox"/> Noah Room <small>was Mary</small>	
Level 3 (Lower Level)	<input type="checkbox"/> Choir Room	<input type="checkbox"/> Undercroft (carpet)	<input type="checkbox"/> Youth Room	
		<input type="checkbox"/> Rachel/Sarah (tile)	<input type="checkbox"/> Art Room <small>was Old Kitchen</small>	

OUTDOOR AREAS (check all that apply)

<input type="checkbox"/> East Lot (97 spaces)	<input type="checkbox"/> South Lot (33 spaces)	<input type="checkbox"/> West Lot (71 spaces)	<input type="checkbox"/> Chapel (on hill)
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SET UP (chairs are based on number attending)...

Unless indicated here: _____ number of chairs.

Style	<input type="checkbox"/> Circle	<input type="checkbox"/> Theater	<input type="checkbox"/> U	<input type="checkbox"/> Other (use back of form)
Tables	<input type="checkbox"/> Rounds	<input type="checkbox"/> 8' Rectangle	<input type="checkbox"/> 6'x30" Rectangle	<input type="checkbox"/> 6'x18" Rectangle
Facing	<input type="checkbox"/> North	<input type="checkbox"/> South	<input type="checkbox"/> East	<input type="checkbox"/> West

EQUIPMENT

<input type="checkbox"/> White Board	<input type="checkbox"/> Easel	<input type="checkbox"/> Flip Chart	<input type="checkbox"/> Podium	<input type="checkbox"/> TV/VCR/DVD
<input type="checkbox"/> Overhead Proj.	<input type="checkbox"/> Screen	<input type="checkbox"/> PA System	<input type="checkbox"/> Hose	<input type="checkbox"/> Nozzle
<input type="checkbox"/> Other (describe): _____				

All non-church sponsored activity groups will be responsible for providing their own insurance coverage, and assume full responsibility for personal injury and property damage.

Groups are responsible to notify ASLC of any facility change or cancellation.

Other than "regular cleaning" - all groups are responsible for cleaning rooms and grounds used. Fees will be charged for custodial cleaning, if rooms and grounds are not cleaned after use.

OFFICE USE ONLY:	Reservation Number: _____	Fee: \$ _____
	Notes: _____	