



METROPOLITAN United Methodist Church

112 West Lanvale Street, Baltimore, MD 21217

(410) 523-1366

E-mail: info@metropolitanumc.org

BUILDING USE REQUEST FORM

Please provide the following information and return the form(s) to the church for approval.

Group Name _____ Application Date _____

Person Responsible _____

Phone Number _____ (w/c) _____

Email address (if applicable) _____

Metropolitan Church Group (Y/N) _____ Non-Methodist Group (Y/N) _____

Please circle appropriate group: SOCIAL CIVIC SERVICE EDUCATIONAL CHARITABLE

Please briefly describe your activity _____

Expected attendance _____ Date Requested _____ Time Needed _____

Facilities Requested

Social Hall _____ Kitchen _____ Sanctuary _____ Parsonage _____ Chapel _____
Other (define) _____

Equipment Needed: _____ Organ _____ Piano _____

Other (_____

- \$50 deposit is required to secure the facility for the requested date.

Name of person or group responsible for care, use and damage to facilities and equipment used:

Address _____

Home Phone _____ Work Phone _____ Cell Phone _____
Email _____

SIGNATURE: _____ Date: _____

<p>For office use only:</p> <p>Trustee Board Approved/Denied: _____ Date of approval: _____</p> <p>Pastor Approved/Denied: _____ Date of approval: _____</p> <p>Comments _____</p> <p>Designated Trustee Board Member scheduled to be available on date of event: _____</p>
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