FIRST UNITARIAN UNIVERSALIST SOCIETY

REQUEST FOR USE OF MEETING HOUSE SPACE FOR UU COMMITTEE MEETINGS, ACTIVITIES, OR EVENTS DIRECTLY RELATED TO SOCIETY

Name of Event:	
Date of Event:	Time of Event:
Time In Building:	Time Out of Building:
Group Requesting Space:	
Number in Attendance:	Open To The Public? Yes No
Childcare Provided? Yes No If you intend to provide childcare, please call a	I Need Accessible Space? Yes No nd arrange for it yourself.
Space Requested (please list room/s,	
Email:	Phone:
Indicate Any Special Needs: (i.e., table	es, chairs, TV/VCR, other equipment).
	are Coordinator, to arrange for childcare.
·	•
	icilities Manager, you are required to do your own set-up, take- tain that everything has been returned to where it belongs, turn
NO PARKING BEFORE 5:00 P.M. WE	EEKDAYS
This form will also put your event on the lf this event is canceled, or the time is	ne Society Calendar. changed, please notify the Society Administrator immediately.
Approval:	Date:

Revised 07/21/2009