

CALENDAR ROOM RESERVATIONS

Date: _____

S M T W Th F S/Every Other Week/Week 1 2 3 4 5

Room: _____

Church Narthex Upper Hall Lower Hall Adult Learning Center
Conference Room Classroom #1 2 3 4 5 6 7 8

Meeting/Event Starting Time: _____

Meeting/Event Ending Time: _____

Setup Time (hours): _____

Teardown Time (hours): _____

Committee/Organization: _____

Person Requesting Room: _____

Date Submitted: _____

CALENDAR CHANGE REQUEST

Original Date and Time: _____

Original Room: _____

New Date and Time: _____

New Room: _____

Committee/Organization: _____

Person Requesting Change: _____

Date Submitted: _____