

BEEBE MEMORIAL CATHEDRAL
CHRISTIAN METHODIST EPISCOPAL CHURCH
3900 Telegraph Avenue, Oakland, CA 94609
Phone: (510) 655-6114 Fax: (510) 655-6170
e-mail: thecathedral@sbcglobal.net

FACILITY USE REQUEST FORM
(For Non-Membership Events Only)

All requests must be submitted at least **30** days prior to the planned event(s).

All requests for use of facilities must be submitted to the Chairperson of the Trustee Board through the Church Office on this form in order to be processed.

PLEASE NOTE: *Members who desire to use Beebe's facilities for "non-membership events" must use this request form.*

Today's Date: _____

Organization or Person requesting use of facility: _____

Type of meeting or event: _____

Date(s) Requested:	Time(s) Requested:
_____	From: _____ To: _____
_____	From: _____ To: _____
_____	From: _____ To: _____
_____	From: _____ To: _____
_____	From: _____ To: _____

Requested Facility: (Please indicate 1st and 2nd choices)
 Sanctuary Social Hall & Kitchen Social Hall Only Chapel Multi-Purpose Room
 Class Rooms

Anticipated number of persons attending meeting/event: _____

Special set-up needs: _____

Name of Organization/Auxiliary Contact Person: _____
Work Telephone Number _____ Home Telephone Number _____

Alternate Contact Person: _____
Work Telephone Number _____ Home Telephone Number _____

To be completed by Beebe Memorial Cathedral's Board of Trustees

Request Approved Date: _____ Request Not Approved Date: _____

Reason Request Not Approved: _____

Approved or Not Approved use of facility confirmed with requesting party: By _____ Date: _____
Name