

REQUEST FOR THE USE OF CHURCH FACILITIES

Wellman Baptist Church
1918 Wellman Dr. SE
Bogue Chitto, Ms. 39629

The following church facilities are requested to be reserved:

Room: _____ Building _____

Kitchen _____ Dining Hall _____

Date desired _____ Time from _____ to _____

Group/Individual making request _____

We agree to abide by the policies of Wellman Baptist Church.

Signed _____ Phone # _____

RECORD OF EQUIPMENT BORROWED

Wellman Baptist Church
1918 Wellman Dr. SE
Bogue Chitto, Ms. 39629

Items Borrowed:

Number _____ Description _____

Number _____ Description _____

Number _____ Description _____

Date borrowed _____ Date Returned _____

Staff signature _____

I agree to take full responsibility for the above items while they are away from the church property. In the event they are lost or damaged, I will reimburse the church a sufficient amount to replace them.

Signature _____ Date _____