



# First Presbyterian Church

302 West Whitner Street ~ Anderson, SC 29624

## Family Life Center RESERVATION FORM

Gym, Game Room, McDougald Room, Canteen

We are delighted to learn that your group will be using the Family Life Center in the near future. Contact the Director of Youth Ministries at 864-225-2551 ext 117 for questions or concerns. Please fill out this form and return it as soon as possible so that we can hold your date and prepare for your group.

Date of the Request: \_\_\_\_\_

**PLEASE PRINT**

Organization or Individual(s) Making the Request:

\_\_\_\_\_

Name or Type of Event: \_\_\_\_\_

Room(s) Required:  Gym,  Game Room,  Canteen,  McDougald Room

Date(s) of Event: \_\_\_\_\_ Hours of Day to be Used: \_\_\_\_\_ to \_\_\_\_\_

Set-up Date: \_\_\_\_\_ Set-up Hours of Day: \_\_\_\_\_ to \_\_\_\_\_

Church Function or Church Sponsored Group:  Yes or  No

Needs or Requirements:

- Will you need assistance from FPC to set-up the Tables, Chairs, Etc. for your event?:  
 Yes or  No

- If YES, please describe your needs: \_\_\_\_\_

- Will the Cooking items in the Canteen be used?:  Yes or  No

- If using the kitchen items in the canteen, please make sure all items are fully cleaned and that all items are turned off prior to leaving the premise. Please take all trash to the dumpster behind the building and place empty trash bags in the containers.

- NOTE: Groups or individuals using the facility is responsible to provide all items needed for their event such as paper goods, party materials, cups, and food items.

Person(s) in Charge: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ (Work): \_\_\_\_\_ (Mobile): \_\_\_\_\_

In requesting the facilities of the Family Life Center, I (the group) understand that I (the group) am responsible for any damage or loss incurred to the building, facilities, or equipment as a result of use. I (the group) will be responsible for leaving the facility in the condition in which it was found.

Fee Schedule: FPC Members: \$30 / \$ 60 for Non-FPC Members for 2 Hours (open to close)  
**Make Checks Payable to "First Presbyterian Church"**

Signature or Person Requesting: \_\_\_\_\_ Date: \_\_\_\_\_

Return this form (and fee, if required) to either – Director or Youth Ministries or Administrative Assistant  
E-mail: [Information@FPCAndersonSC.com](mailto:Information@FPCAndersonSC.com) OR Fax: 864-225-2552 OR by Mail.