



221 West Bradley Avenue  
 Gastonia, North Carolina 28052  
 (704) 865-9016 • Fax: (704) 865-9057  
 Elder John A. McCullough, Jr., Senior Pastor

**Member**  
 Members in good standing, no fees apply.

**A member in good standing is one who has been a part of the Ministry for more than six (6) months with regular church attendance and in good financial standing.**

**USE OF BUILDING USE OF BUILDING REQUEST FORM**

<b>Church Building – No fees applicable up to 4 hr period</b> <input type="checkbox"/> Sanctuary <input type="checkbox"/> Room #1 <input type="checkbox"/> Room #2 <input type="checkbox"/> Room #3 <input type="checkbox"/> Room #4 <input type="checkbox"/> Room #5 <input type="checkbox"/> Assembly Room	<b>Family Life Center- No fees applicable up to 4 hr period</b> <input type="checkbox"/> Gymnasium (Maximum Capacity: 700) <input type="checkbox"/> Multi-purpose Room (Maximum Capacity: 80) <input type="checkbox"/> Kitchen (Catering done Licensed Caterer Only) <input type="checkbox"/> Other: (Specify)
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**Additional rates: \$2.00 per minute for time beyond 4 (four) hour period.**

Date of Request:	Time:
Person/Group Requesting:	Membership Number:
Address:	
Telephone: (Home)	(Work)
(Mobile)	Fax:

<b>Date(s) of Event:</b>	
<b>Type of Event:</b>	<b>Number of People Expected:</b> _____
<b>Set-Up Time From</b> _____ <b>to</b> _____	
<b>Time Event Begins:</b>	<b>Time Event Ends:</b>
<b>Arrangements: (what do you need? {ie tables}, How many do you need?) Please be specific!</b>	

<b>SIGNATURE OF REQUESTOR:</b>				<b>Date:</b> _____	
<input type="checkbox"/> Special lighting	No Fee	<input type="checkbox"/> Transportation	No Fee	<input type="checkbox"/> *Aesthetics Ministry	\$25.00 per hour
<input type="checkbox"/> Ushers/Greeters	No Fee	<input type="checkbox"/> *Pastor	Donation	<input type="checkbox"/> Security	\$25.00 per hour * *
<input type="checkbox"/> Hospitality	No Fee	<input type="checkbox"/> *Video	Fee Varies	<input type="checkbox"/> Television	
<input type="checkbox"/> Health Care	No Fee	<input type="checkbox"/> *Music	Fee Varies	<input type="checkbox"/> LCD Projector	\$25.00 per hour
<input type="checkbox"/> Liturgical Dance	No Fee	<input type="checkbox"/> Audio	\$25.00 per hour	<input type="checkbox"/> Changes in décor	Must obtain prior approval
<input type="checkbox"/> Nursery	No Fee	<input type="checkbox"/> EVENT STAFF	\$25.00 per hour	<input type="checkbox"/> FUNERAL	No Fee
<input type="checkbox"/> Table Clothes	\$3.00 ea <small>(plastic only)</small>	<input type="checkbox"/>		<input type="checkbox"/>	

**FOR COMPLETION BY CHURCH ADMINISTRATION**

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> Fee may be waived for Community Service events	<b>GRAND TOTAL:</b>
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**SIGNATURE OF DIRECTOR OF BUILDING AND OPERATIONS:**

- \$100.00 Deposit (Refundable)
- \*\*Security Services required for events of more than 50 people in attendance.
- 50% deposit required to reserve the date / Balance due 2 weeks prior to the event
- Private event insurance may be required.
- Room adjustments may be subject to change according to availability.
- 24-hour Cancellation Fee will be applied.
- Credit Cards can be used for incidentals.
- Service fees are applied for rehearsals and Wedding Day
- \* Extra Fees may apply.



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**NON-MEMBER**

**USE OF BUILDING USE OF BUILDING REQUEST FORM**

<b>Church Building - \$700.00 for 4 hour period</b> <input type="checkbox"/> Sanctuary <input type="checkbox"/> Room #1 <input type="checkbox"/> Room #2 <input type="checkbox"/> Room #3 <input type="checkbox"/> Room #4 <input type="checkbox"/> Room #5 <input type="checkbox"/> Assembly Room	<b>Family Life Center - \$1,000.00 4 hour period</b> <input type="checkbox"/> Gymnasium (Maximum Capacity: 700) <input type="checkbox"/> Multi-purpose Room (Maximum Capacity: 80) <input type="checkbox"/> Kitchen (Catering done Licensed Caterer Only)
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**Additional rates: \$2.00 per minute for time beyond 4 (four) hour period.**

Date of Request:	Time:
Person/Group Requesting:	Membership Number:
Address:	
Telephone: (Home)	(Work)
(Mobile)	Fax:
<b>Date(s) of Event:</b>	
<b>Type of Event:</b>	
Set-Up Time From _____ to _____	
Time Event Begins:	Time Event Ends:
Arrangements: (what do you need? {ie tables}, How many do you need?) Please be specific!	

**Signature of Requestor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<input type="checkbox"/> Special lighting	<input type="checkbox"/> EVENT STAFF	<input type="checkbox"/> Security*
<input type="checkbox"/> Ushers/Greeters	<input type="checkbox"/> *Pastor	Discuss with Pastor
<input type="checkbox"/> Hospitality	<input type="checkbox"/> *Video	Fee Varies
<input type="checkbox"/> Health Care	<input type="checkbox"/> *Music	Fee Varies
<input type="checkbox"/> Liturgical Dance	<input type="checkbox"/> *Aesthetics Ministry	<input type="checkbox"/> LCD Projector
<input type="checkbox"/> Nursery	<input type="checkbox"/> Audio	<input type="checkbox"/> Changes in décor
		Must obtain prior approval

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> Fee may be waived for Community Service events	<b>GRAND TOTAL:</b>
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**SIGNATURE OF DIRECTOR OF BUILDING AND OPERATIONS:** \_\_\_\_\_

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- 50% deposit required to reserve the date / Balance due 2 weeks prior to the event
- Private event insurance may be required.
- Room adjustments may be subject to change according to availability.
- 24-hour Cancellation Fee will be applied.
- Debit Cards can be used.
- Service fees are applied for rehearsals and Wedding Day
- \* Extra Fees may apply.