LOVE AND FAITH COMMUNITY CHURCH

BISHOP-ELECT LAMAR SIMMONS, PASTOR 1410 East Indian Head Drive; Tallahassee, FL 32301 (850) 878.4930 ♦ FAX (850) 878.1269

Email: administration@thelfcc.org

EXTERNAL BUILDING REQUEST FORM

Date Submitted: ____/___/

Please return to the LFCC Administrative Offices no later than 21 business days prior to the date of the event. LFCC Staff will contact you to confirm building availability OR to reschedule, within 7-10 business days.

All external building requests must be approved by Pastor Lamar Simmons.

Delays may occur as a result of his availability.

Name:							
Company/Organiza	ation						
Contact Number:							
Email Address:							
EVENT INFORMA	TION						
Requested Date(s):							
Alternate Date(s):							
Expected # of Attendees:							
Free Event or Ticketed Event:							
Type of Event (Pleas	se check o	ne):					
☐ Concert/Musical	☐ Sei	ninar/Workshop		Worship Serv	ice 🗆 (Other:	
Areas of the Facility	Requeste	d (Please check al	l th	at apply):			
☐ Sanctuary	☐ Fellowship Hall ☐			Kitchen	\square N	☐ Multipurpose Room	
☐ Boardroom	☐ Other	r:					
Event Times				Rehearsal Dat	te & Tim	e	
Setup Time:				Rehearsal Reque	ested:		
Sound Check:				Rehearsal Date:			
Event Start Time:				Rehearsal State	Time:		
Event End Time:				Rehearsal End T	Time:		
Breakdown/Exit Building Time:							

^{**}Please note that there will be additional fees if event ends later than contracted/requested time.

Other Needs:				
Audio Recording Requested: ☐ Yes ☐ N	O Blank CD(s) must be provided at least 3 days prior to event.			
Multi-Media Requested:	O Projector presentations must be provided at least 5 days prior to event.			
Permission for Decorations:	All decorations must be approved by the Administrative Staff, in advance; must be provided by the requesting organization.			
# of Tables requested:	of Chairs requested:			
	or requests for the date of the event. Special needs include, sound requirements, lighting, additional staff, etc.)			
this fee will be used to supplement any costs a etc. I recognize that such a fee is determined	anding that a Facility Usage Fee may be charged. If assessed, associated with facility usage, equipment needs, additional staff, on a case by case basis, after all event needs and requirements or credit card is required to be on file should the vendor go over			
Community Church reserves the right to resch be given based on event type, existing building Faith Community Church. Love and Faith Co condition fee, after the event has come to an ex	usage is based upon availability; however, Love and Faith nedule and/or cancel events should a conflict arise. Priority will g requests and other factors, as deemed significant by Love and ommunity Church further reserves the right to assess a building and, in the event of vandalism, accidents, extraordinary clean-up, curred during my usage of the facility for the event and its related			
aforementioned entity and its officers, leaders	demnifies Love and Faith Community Church and holds the and members therein, protected from all liability, loss, damage, of any person(s) and/or property, which may occur, during my id facility.			
Name (if different from above)	Title			
Signature				
**	*For Office Use Only**			
Received by:				
☐ Approved ☐ Denied Explanation:				
Pastor Simmons' Initials:	Administrator's Initials:			
Organization Contacted: □ Yes □ No	Date:/			