

ARKANSAS BAPTIST COLLEGE FACILITY REQUEST FORM

Type of Event or Activity:

Facility Requested

Please Specify

Date Requested:

Time:

Estimated number of attending:

Ticketed Event:

Equipment needed:

Number of Tables:

Number of Chairs:

P A System:

Security:

Other (Please Specify) /

Sponsor Contact Person :

Department:

Telephone:

Cell:

Fax:

Cost of Facility: _____ Deposit _____

All groups or organizations are required to remove all personal materials, equipment and items following the event, and leave the facility clean. All ABC equipment is to be left in the facility unless otherwise instructed. It is recommended that you show-up at least 15 minutes prior to your event. If doors are locked, please contact Security @ 420-1211 or 786-7356.

Asst. Director of Facilities: Denise Alford

Phone: 501-786-7370

Email:denise.alford@arkansasbaptist.edu

Sign-off Signature: _____ Date Submitted: _____

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