

Today's Date _____

Approval Date: _____

RESERVATION REQUEST FORM

The ROC @ Harrodsburg Baptist Church
350 S. Chiles Street
Harrodsburg, KY 40330

Name of Requesting Individual\Group\Organization (_____) Phone#

Requesting Person (if different from above) \ Age (_____) Alternate #

Describe Function:

Please check the activity center(s) you are requesting:

- Recreation & Outreach Center- (ROC)
- Christian Activities Center- (CAC)
- Basement Gymnasium

Requested Date: _____ Requested Time: _____ to _____
(Limited to 4 hours unless approved otherwise)

of Adults Expected to Attend This Function: _____ Children: _____
(Groups of more than 100 must be approved by the ROC Director)

REQUESTOR'S RESPONSIBILITY:

1. TURN IN COMPLETED REQUEST FORM TO **CHAD RAMSEY**, MINISTER OF YOUTH AND ROC, AT LEAST 2 WEEKS PRIOR TO THE EVENT
2. Meet with Director at least two days prior to the scheduled event to confirm the date and go over the rental procedures.
3. Turn in your **REFUNDABLE DEPOSIT** to the ROC Director or Church Office. (Deposit will be refunded if facility is left clean and in good order.)
 \$100 ROC \$100 CAC
3. Turn in non-refundable fee to ROC Director or Church Office before event.
 \$50 (Non-HBC Member) Free (HBC Member) Other: _____
4. Ensure all participants follow our RULES OF RECREATION , and only use the Center(s) in which they have been approved.
5. Assume responsibility for any damages made by any participant.

For Office Use Only

Circle One:

Accept Deny Date: _____

Reason for denial:

PAYMENT: _____ _____ _____
 AMOUNT DATE COLLECTOR'S INITIALS

ROC DIRECTOR'S SIGNATURE: _____