

**First United Methodist Church of Clewiston**  
**Building Use Request Form**

**Organization/Event/Person :** \_\_\_\_\_

**Contact Person** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Contact Person Email:** \_\_\_\_\_

**Dates(s) / Day (s) of Requested use:** \_\_\_\_\_

**Time of Requested use: From** \_\_\_\_\_ **To** \_\_\_\_\_

**Facilities you are requesting (check below):**

\_\_\_\_\_ **LEC (Life Enrichment Center)**    **Kitchen** \_\_\_\_\_

\_\_\_\_\_ **Class Room (TBA)**                      **Sanctuary** \_\_\_\_\_

**Purpose of use:** \_\_\_\_\_

**I will read and agree to the building use guidelines when my application has been approved.**

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**Contact Person Group Signature**

**Date**

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**Key Pickup Initials (Must be contact person)**

**Date P/U**

**Date Ret'd**

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**Office/Pastor Approval**

**Date**

**Trustee(s) Notified**

**Date**

**Print out and complete this page and drop off to:**

**First United Methodist Church of Clewiston**

**352 W Arcade Avenue**

**Clewiston, FL 33440**

**Reminders:**

- 1) Request should be made 8 weeks prior to the event or a.s.a.p.**
- 2) To cancel or re-schedule call the church at (863-983-5269).**
- 3) Any room/building used, MUST be returned to the condition prior to your use. In this way we are all good stewards of what God has blessed us with.**