



St. Paul Baptist Church * 119 Elm Street* Montclair, NJ 07042* 973-8338*973-746-2546 (f)

Building Usage By-external Groups

Today's Date _____

Rev. Michael J. Cox , Pastor

Name of Group _____
Outside groups give the name of the Organization/ Church based groups list the name of the ministry

Group Address _____
Include: street address, town, state and zip code

Person Making Arrangements:

Name & Address _____

Telephone # day _____ even. _____

Email _____ Fax _____

Contact Person _____

Check if it is a church-based group π If not, are any members also members of St. Paul?
Yes No

Please list: _____

Event

Type of event _____
i.e., meeting, rehearsal, banquet, worship service, concert, etc.

How many people are expectances?

Event Purpose _____

How will event be publicized? _____

Who is your audience? _____

Date (include day of the week) _____ Time _____
Include: set up & clean up time

Room(s) Requested: >Sanctuary >Billups Hall >Conference Room >Usher's Room >Kitchen
Christian Activities Bldg. Other (explain) _____

Donation: Sanctuary- \$650; Billups Hall- \$350; Conference Rm- \$100; Hospitality Rm- \$75; Kitchen - \$200; Christian Activities Bldg. (1 room) \$50

Equipment Needed: Television VCR Microphone(s) Podium Table(s) # _____ Chair(s) # _____
Other (explain) _____

Office Use: _____ Donation: _____
Pastor _____

Deacon Chair _____ Date

Trustee Chair _____ Date

Trustee Chair _____ Date