CHAPEL FACILITY RESEVATION REQUEST

PRIVACY ACT STATEMENT

Today's date:

AUTHORITY:10 USC 8012. PRINCIPLE PURPOSE(S): Used for scheduling and coordinating chapel programs and activities. **ROUTINE USES:** To arrange chapel/R.E. facility reservations. **WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION:** Disclosure of information is voluntary. However, without requested information, no Chaplain will be able to perform the ceremony or rite, no facility reservation will be made, and no one will be present and/or key(s) issued to open and prepare the facility on weekends or after duty hours.

1. **Date of Event**	2. **Setup/Clean Up Time**	3. **Actual Time of event:**	4. **Religious Preference**

5. Facility Requested:

- ☐ Chapel 1
- ☐ Chapel 2
- ☐ Chapel 3
- ☐ Parking Lot: Chapel _____
- ☐ Bldg 326
- ☐ Bldg 612
- ☐ Bldg 856

6. Rooms Requested:

- ☐ Sanctuary
- ☐ Annexes (CH 1 A, B, C and D)
- ☐ Kitchen
- ☐ Other (Specify)_____
- ☐ Bldg 856

7. Program Name or Title:

8. Program Description:

- ☐ Worship Service
- ☐ Baptism
- ☐ Wedding (Rehearsal date/time)_____
- ☐ Class
- ☐ Meeting
- ☐ Choir
- ☐ Memorial Service (Rehearsal date/time) _____
- ☐ Other (Specify)_____

9. Sponsoring Chaplain:

10. Chaplain Assistant Support Required (for chapel events only)? ☐ No ☐ Yes

If Item 10 is 'No,' provide name of individual securing the facility:

11. Number expected to attend:

12. Special Requirements and Facility Set-up:

NOTE: Non-Chapel sponsored activities must furnish their own supplies and equipment. (I.E. Cups, Plates, VCR, Overhead projector, laptop, etc.)

13. **Name of Requestor:**	14. **Duty Phone:**	15. **Home Phone:**
16. **Organization:**	17. **E-mail Address:**	

Signature: **By signing this form, I agree to abide by all rules and regulations governing the use of the chapel facilities. These rules are listed on the reverse side of this form.**

For Completion by the Chapel Staff

	Initial	Date		Initial	Date
Senior Catholic Chaplain			Wing Chaplain (If Non-Chapel)		
Senior Protestant Chaplain			Entered on Chapel Calendar		
Chapel Superintendent			Requestor Notified		

Additional Information or Comments?

NOTE: FILLING OUT THIS FORM DOES NOT GUARANTEE THE USE OF THE FACILITY.

18 WG Form 0-166, 22 Jan 07