

CAROLINA BAPTIST ASSOCIATION FACILITIES

Priority

1. Carolina Baptist Association
2. Churches in Carolina Baptist Association
3. Non-profit Christian service organizations
4. Non-profit social service organizations

General Prohibitions

1. No alcoholic beverages
2. No smoking
3. No weapons
4. No non-Christian conduct

General Requirements

1. For individuals or groups from a CBA church, the request must come from the church.
2. Users must leave facilities clean, in restored order and properly secured.
3. Users are responsible for any damages.
4. There is a fee for use of the downstairs area.

Regular Scheduling

1. Even regular scheduling may be interrupted by priority use.
2. Guest users should expect occasional inconveniences.
3. Guests are not permitted to sublet use of facilities.

If you have any questions call 828-693-4274.

Submit to:

Carolina Baptist Association
601 Hebron Street
Hendersonville, NC 28739

Email to: cba1877@gmail.com

Office Use Only

Approved by _____

Date Approved _____

Signed _____

**Carolina Baptist Association
Application for Use of Building**

Name of Church/Organization _____ Telephone _____

State your priority rating _____

1. Carolina Baptist Association
2. Carolina Baptist Association Member Church (Name of Church _____)
3. Non-Profit Christian Service Organization
4. Non-Profit Social Service Organization

If service organization, state its purpose _____

Room Needed Conference Room-Downstairs (Seats up to 100)
 Kitchen-Downstairs
 Committee Room-Upstairs (Seats up to 10)

Date(s) needed _____

If recurring, start date _____ end date _____

Start time _____ end time _____

If recurring, Weekly Monthly Other _____

Number of people _____

What will be used other than space? _____

Name of person who assumes the responsibility to Carolina Baptist Association for restoring order, cleaning and securing facilities _____

Address _____

City _____ State _____ Zip _____

Email _____

Home Phone _____ Cell Phone _____ Work Phone _____

Signature _____

Other Contacts _____ Phone _____

_____ Phone _____

Additional Notes _____

Pastor Signature (If a Church) _____ Date _____