



Covenant Church United Methodist Facility Request Form
Please return completed form to covenantchurchhighpoint@gmail.com

Purpose: To assure the safety of our congregation and visitors during the continuing concern with the Covid-19 virus the following form needs to be filled out and instructions followed.

Instructions: To apply for use, please read and fill out all sections of the following form and submit to the office. Approval will be granted via the office and the form returned to be completed after use. Complete the final sections and return the form to covenantchurchhighpoint@gmail.com.

(This form is available online. www.covenantchurchhighpoint.com/facilityuse)

Initial Request Information:

Today's Date: _____

Requester/Group Leader: _____

Leader Phone Number: _____

Leader Email: _____

Group Name: _____

Number of Attendees: _____

Date of Use: _____

Hours of Use: _____ to _____

Room Preference: Fellowship Hall Youth Room Sanctuary Room 10 Room 8 Gathering Area



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Guidelines and Instructions:

Each room use must be preapproved via submission of this form. The Requester / Leader should fill out the online request form prior to completing this as a group. If anyone in your group has had known exposure to someone with Covid-19 in the past 14 days, we ask that you do not attend indoor gatherings at this time.

If you are approved and choose to utilize a space, you have committed to the following:

- We will identify a group leader that will ensure all guidelines are met.
- We will wear masks at all times, no exceptions.
- We will maintain physical distancing of 6 feet (2 meters) during the event. *(Exceptions apply for family units living in the same household.)*
- We will perform post clean up (sanitizing when necessary).
- We will assign a person responsible for keeping attendance for the purposes of contact tracing.

Additionally, our group commits to the following measures to ensure safety (please discuss as a group and establish additional requirements if desired):

Example: We will bring our own chairs; We will spray down our chairs before and after use; etc...

- _____

- _____

- _____

- _____

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- _____

The Requester / Leader’s submission of this form signifies that they are agreeing to all requirements and assuring all activity required will be completed.

Leader Name (Print): _____

Leader Signature: _____