

Building Key Request Form

(Fill out form completely and submit to the Facilities Department for approval.)

Date of Request _____

Name of Ministry or Group: _____

Individual to be assigned key: _____

Telephone: (H) _____

(W) _____

Purpose of request: _____

Pastor or Ministry Leader submitting request: _____ Telephone: (H) _____

(W) _____

Notes or comments:

For Facilities Department Use

Administration Approval of Request by: _____

Assigned: Date _____ **Key #** _____ By _____

Returned: Date _____ **Key #** _____ To _____