

**FORM 3 - WFBC Facilities Set-Up Form**  
**Sanctuary**

Contact Name: \_\_\_\_\_ Contact Phone No.: \_\_\_\_\_

Contact Address: \_\_\_\_\_  
(Street/P.O. Box) (City) (State) (Zip Code)

Contact E-Mail Address: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Number of Participants: \_\_\_\_\_

Time of Event: (Set Up Begin) \_\_\_\_\_ am/pm (Circle one)

(Clean Up Completed) \_\_\_\_\_ am/pm (Circle one)

Pulpit Chairs: \_\_\_\_\_ Left in Place \_\_\_\_\_ Remove

Communion Table: \_\_\_\_\_ Left in Place \_\_\_\_\_ Remove

**Notes: Pulpit and Choir Loft chairs will not be removed.**

**No decorations may be placed on the baptistery in front of the cross.**

Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Form may be e-mailed to [denise.stinson@wakeforestbaptistchurch.org](mailto:denise.stinson@wakeforestbaptistchurch.org))

<p>Internal Use Only:</p> <p>Office Administrator Reviewed Set Up Request: _____ (Date)</p> <p>Set Up Request: _____ Approved _____ Denied</p> <p>Requesting Party Notified of Approval or Proposed Modifications _____ (Date)</p>
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