

Grace Hill Church Equipment Usage Form

Name:	Phon	e:
(Ministry/Individual Requesting		
Address:		
(Street)	(City)	(State)
Item(s) requested:		
Event or Purpose for equipment use	e:	
Requested Date(s) of Use:		
Time(s):		
(Start/Finish)	· · · · · · · · · · · · · · · · · · ·	
Please note that all requested items mot returned within 24 hours, will be in		s after last day of listed above. Any items endent upon item.
I, Church, and I must return each item w	understand this/vithout any damages not	these item(s) are property of Grace Hill noted prior to sign out.
		Signature
For (Office Use Only	Signature of Administrative Staff
Approved by:		
Date Checked Out:	Date of Return for all items listed:	
Person Notified of Approval:		Date/Time: /