

**St. Andrew's Episcopal Church**

217 W. 26<sup>th</sup> Street P.O. Box 405 Bryan, TX. 77806

979-822-5176 Fax: 979-823-3874

Email: office@standrewsbcs.org Website: www.standrewsbcs.org

**Facilities Use  
Application**

Date of application \_\_\_\_\_

Name of individual/Group/Organization \_\_\_\_\_

Address of Individual/Group/Organization \_\_\_\_\_

Phone No. of Individual/group/Organization \_\_\_\_\_

E-Mail contact information \_\_\_\_\_

Name/Phone/Email Contact for individual of Group or Organization (if applicable)

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

Date/dates desired for use of facilities \_\_\_\_\_

Time/times desired for use of facilities

Facilities desired to be used: \_\_\_\_\_

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

Purpose of Use of Facilities \_\_\_\_\_

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

Deposit Required \_\_\_\_\_ Deposit Paid Date \_\_\_\_\_

Deposit Refunded Date \_\_\_\_\_ Amount \_\_\_\_\_

Fees Required \_\_\_\_\_ Fees Paid Date \_\_\_\_\_

I/We have received a copy of and have read and understand the St. Andrew's Church Facilities Use Policies.

\_\_\_\_\_  
Signature (title if applicable) Date