

ADDENDUM "B"

**Special Use Request Form
First United Methodist Church of Land O Lakes, FL**

(Please Print)

Person making the request _____ Name of
Organization if Applicable _____
Type of Use _____
Applicant Address _____ Phone _____
Fax _____ E-mail _____
Organization Address _____ Phone _____
Fax _____ E-mail _____
Person in Charge _____ Type of Activity _____
Date(s) needed _____ Time needed _____

Special Request

Facilities Use Team Response

Facilities Use Team Approval _____ **Date:** _____

Department Approval (if needed): _____ **Date:** _____

Group Notification: _____ **Date:** _____