TRAINING FACILITY INFORMATION FORM

	Date: _		
Chur	-ch Name:		
Stre	et Address:		
Phor	ne Number:	Fax Number:	
Ema	il:	Web Address:	
Past	or's Name:		
	e some driving instructions to your section near you.	churchYou can start from any major hi	ghway or
	ies, titles, and contact information of	two people who have keys/access to your b	uilding:
	there a central area or reception a fmaterials?	rea that can be used for registration and d	stribution
	st the places to meet (classrooms, ach room. List only those that can be	fellowship hall, and sanctuary) and the case set up for adult activities.	apacity of
	ive the name, title and contact infor se of these spaces.	rmation of the person who reserves and scl	nedules the
• G	ive some details about your nursery	y and the name title and contact information	on of the

person who schedules childcare.

DINING FACILITIES:

- What areas can be used for feeding people and what is the capacity of each?
- Kitchens---Are ovens, microwaves, refrigerators, and freezers available for us to use?
- Do you have an ice machine?
- Is there coffee equipment we can use?

AUDIOVISUAL EQUIPMENT:

- What audio-visual equipment is available to us? (including projector/screen for Power Points)
- Are there moveable dry erase boards/black boards, or easels for flip charts?
- Are there sound systems in the sanctuary or fellowship hall that we can use?
- Is there a portable sound system that can be used in other large areas?
- What is the name, title and contact information of the person who can reserve and prepare the equipment?
- What is the name, title and contact information of the person who can *operate* the sound system?

OTHER INFORMATION:

- Where is safety equipment and first aid equipment located?
- Are there special accommodations available for people living with disabilities--- entry ramps, bathroom access, hearing devices for the sound system, elevator, other?
- Are there access barriers that we need to be aware of? (EX: lots of stairs leading to the training area)
- Are there any outside security issues that we need to know about?

Prepared and submitted by:				
Name: _				
Phone:		E-mail:		

Submit one copy to your District Director and save a copy.