

Media Equipment Requisition Form

Please fill this form and email to
info@eccseattle.org

Date(s) of requested equipment use: _____

Group/Fellowship requesting equipment: _____

Contact Person: _____ Phone # _____

Email: _____

Equipment needed: _____

Room and location for set up: _____

Please submit one week before requested date:

For official use only:

Date request form was received _____ Media Member: _____

Media Member in charge of set up: _____ Date Completed _____

After take down and put back in storage, please sign below, and return to media inbox in church office.

X _____ Date _____