Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **APPLICATION FOR USE OF CHAPEL FACILITIES** | | | | | | | | | |
| **EVENT DATA** | | | | | | | | | |
| TYPE OF EVENT | | | | | | EVENT DATE(S) | | | |
| COMMAND FUNCTION (CHANGE OF COMMAND, AWARDS, STANDOWN, ETC.)  WEDDING/WEDDING REHEARSAL  COMMAND RELIGIOUS GROUP  OTHER (FUNERAL, RETIREMENT CEREMONY, MEETINGS, FAMILY GROUPS, ETC.)  NAME OF EVENT: | | | | | | SINGLE EVENT | | |  |
| RECURRING EVENT | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| DAY(S) OF THE WEEK | | SUN MON TUE WED THU FRI SAT | | | | | | | |
| TIME REQUESTING  **INCLUDE** SET-UP AND CLEAN -UP | | | START:AM/PM | | | | END: AM/PM | | |
| ESTIMATED # OF ATTENDEES | | | ADULTS: | | | | CHILDREN: | | |
| **POINT OF CONTACT (POC)** | | | | | | | | | |
| COMMAND/GROUP |  | | | | | | | | |
| NAME |  | | | | WORK PHONE | | |  | |
| EMAIL |  | | | | CELL PHONE | | |  | |
| POINT OF CONTACT FOR CLEAN-UP | | | | NAME: | PHONE: | | | EMAIL: | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SPACE(S) BEING REQUESTED FOR USE** | | | | | | | | | | |
| PEARL HARBOR MEMORIAL CHAPEL | | | | | | | | | | |
|  | MAIN CHAPEL\*\* | | **\*\*AV SUPPORT FOR MAIN CHAPEL ONLY** (circle all that apply) Microphone/DVD/CD/Projector Screen/Projector | | | | | | | |
|  | BLESSED SACRAMENT CHAPEL  (CATHOLIC CHAPEL) | | | | |  | CLASSROOM 1&2 (This room only has children’s tables and chairs) | | | |
|  | FELLOWSHIP HALL | | | | |
|  | KITCHEN | | | | |
|  | NURSERY | | | | |
|  | LANAI | | | | |
|  | CONFERENCE ROOM | | | | |  |  | | | |
|  | | | | | |  | | | | |
|  |  | | | | |  | | | | |
|  |  | | | | |  | | | | |
| **WEDDINGS** | | | | | | | | | | |
| **WEDDING: *(MUST PROVIDE A COPY OF CERTIFICATE OF LICENSING FOR THE STATE OF HAWAII FOR THE OFFICIATING CLERGY)*** | | | | | | | | | | |
| NAME OF 1st Spouse | | | | | | | | NAME OF 2nd Spouse | | |
| WORK PHONE | | | | PHONE (HOME/CELL) | | | | WORK PHONE | | PHONE (HOME/CELL) |
| OFFICIATING CLERGY | | | | | | | | | | |
| SIGNATURE OF APPLICANT | | | | | | | | | | |
| CALENDER MANAGER APPROVAL | | YES: NO: | | | REASON: | | | | SIGNATURE: | |
| CHAPLAIN APPROVAL | | YES: NO: | | | REASON: | | | | SIGNATURE: | |

CHAPEL AV EQUIPMENT  
**STATEMENT OF UNDERSTANDING**

By placing your signature on this form, you agree to comply with the following rules in relation to the Chapel’s sound system, projector, and projector screen;

1. Groups will come at least one day prior to test media with sound system and projector. Chapel staff are not always available to help with media issues on the day of your event. It is your responsibility to verify that your equipment is compatible before the event.
   1. **This must be done by whomever will be operating the sound system on the day of the event. Only that person will be authorized to be in the sound booth.**
2. The chapel does NOT provide laptops for use with our projector.
   1. For projector, a laptop with HDMI hook-up capability is required.
      1. Cord supplied by chapel and already in configuration for use.
      2. NMCI laptops do not have an HDMI hook-up and require an adapter (chapel does not have the adapter)
   2. For sound/music, a laptop/ipod/phone with an AUX input (headphone jack) is required.
      1. Cord supplied by chapel and already in configuration for use.
      2. Configuration settings for sound output on YOUR laptop is located on the wall next to the sound system.
3. Groups will allow the sound system at least 30 minutes to properly warm up before attempting to use.
4. **Groups WILL NOT attempt to adjust, unplug, rearrange, or in any way reconfigure the current sound-board set up. Failure to comply will result in denial of further use of the facility.**
5. Groups will turn off the sound system and projector before securing the facility.

EVENT POC SOUND SYSTEM OPERATOR

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Chapel Facilities Agreement for Groups and Events**

**Please read the following and initial each one to acknowledge you’ve read and understood responsibilities for the use of the chapel facilities.**

\_\_\_\_\_Use of a chapel or any of our facility spaces for special religious services, ceremonies, or events will be on a not-to-interfere basis with regularly scheduled CRP (Command Religious Programs) events. The following order of priority governs chapel use:

Priority I – Command Religious Program Activities

Priority II – Command Sponsored Events

Priority III – Other Events

Your reservation may be cancelled if the space (s) is needed due to a crisis. i.e.: Memorial Service for a Military Service Member.

\_\_\_\_\_Requestor must fall under the guidelines of Eligible Personnel: Refers to all active duty personnel, reservists, retired military, military dependents, as well as Department of Defense personnel. Requestor must hold and present a valid Military, Military Dependent ID that was issued them through the DoD or the Military. The privilege to use our space is given to card holders only. If you are reserving the space for a family member who is not a valid card holder we reserve the right to deny the use of the space without question.

\_\_\_\_\_I understand recurring events reservation– upon approval will expire THREE MONTHS from the date of the first meeting. It will be the responsibility of the group POC to remember to resubmit new paperwork for the next Three months.

\_\_\_\_\_I understand the chapel is available only for events that are suitable and consistent with their sacred character. Chapel accouterments (altar et al.) are always off limits, except for religious observance authorized by the Command Chaplains.

\_\_\_\_\_ I understand that the chapels and facilities should ONLY be used for Command Religious Programs (as stated in JBPHHINST1730.1A), training and meeting purposes that are suitable to our spaces. Facility spaces should NEVER be used for recreational type events that are offered through MWR i.e., workout sessions, arts and crafts, child care services when group is not using our spaces, or any other type of events that may raise a concern of hygiene and personal safety. Receptions, and Parties are strictly PROHIBITED.

\_\_\_\_\_I am responsible for notifying the chaplain’s office of any cancellation of meetings or further use of the space requested.

\_\_\_\_\_I understand that any necessary repairs due to damage of space (s) and or property within the spaces will be charged to eligible person or sponsoring command.

\_\_\_\_\_I understand that Group Meetings are responsible for bringing their own toys, games, dvd’ s, and craft items for planned activities.

\_\_\_\_\_There is no use of chapel organ, piano, or any other musical instruments without the approval of chapel staff

\_\_\_\_\_I understand any personal items left behind will be placed in the chapel office LOST and FOUND box for a period of (30) Thirty days after which unclaimed items will be given away to a Joint Base donation center.

\_\_\_\_\_**Smoking and Alcohol of any kind** are prohibited at all times on and around the chapel grounds including the parking lot. Smoking is permitted at the smoking pit by the volleyball courts.

\_\_\_\_\_Food and Drinks are ONLY allowed in the Fellowship Hall and Lanai. **NO food is permitted in the Chapels at any time. Water is permitted with a spill proof lid only**

**HOUSEKEEPING and SECURING POLICIES**

\_\_\_\_\_I understand the use of kitchen does not constitute use of its consumable items (paper plates, cups, eating utensils, coffee, tea, creamers, sugar, etc.). Person(s) or supporting command should supply these items for the event.

\_\_\_\_\_Use of the kitchen refrigerator is mainly for chapel staff and chapel lead events. If you need to use the refrigerator for your event please ask the chapel staff for approval.

\_\_\_\_\_Children must be supervised at all times. Sitter must be CPR qualified. They must provide a copy of qualification’s for chapel records.

\_\_\_\_\_ All tables and chairs must be cleaned and returned to the original arrangement of the space using. Do NOT move tables and chairs between rooms without prior permission. All other chapel equipment may NOT be moved without the approval of the chapel staff.

\_\_\_\_\_Floors must be swept and mopped at the end of each scheduled event. There is a cleaning locker key provided with facility key. A bucket and mop are provided outside with cleaning solution already inside bucket.

\_\_\_\_\_Outside bathrooms should be cleaned if unforeseen accidents occur.

\_\_\_\_\_All rooms with carpet must be vacuumed.

\_\_\_\_\_Ensure all lights, fans, DVD players, televisions, and air conditioners are turned OFF in the spaces. Blinds and curtains are drawn down, doors are secured.

\_\_\_\_\_All trash must be bagged and disposed of at the trash dumpster located by the Tennis Court closest to Bldg. 150.

\_\_\_\_\_I am responsible for checking out the key to use the spaces from the chaplain’s office during the hours of (0830-1500 MON – THU and 0830-1030 on FRI).

\_\_\_\_\_I am responsible for placing the key in the drop box located at the main entrance of the chaplain’s office after the event.

\_\_\_\_\_I understand that loss of a key will result in a replacement fee of $10.00

\_\_\_\_\_I am responsible for filling out and turning in the “Group Checklist Sheet” when turning in the key

\_\_\_\_\_I understand that failure to comply with the responsibilities and policies of the chapel facilities will result in the cancellation of further use of PHMC facilities.

GROUP NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ KEY #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMMAND \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group Attendance #\_\_\_\_\_\_\_\_\_\_\_

**GROUP CLEANING CHECKLIST FOR FACILITY USAGE (turn in after event)**

**FELLOWSHIP HALL, CLASSROOMS, NURSERY, LANAI:**

\_\_\_\_ Chairs and tables wiped down and placed back the way they were before you arrived.

\_\_\_\_ Floors swept and mopped.

\_\_\_\_ Trashcans emptied, liner replaced, and taken to dumpster (between tennis courts and BLDG 150)  
 (to include inside hall, classrooms, nursery and nursery bathroom if used)

\_\_\_\_ Turn off all lights, air conditioning units, and fans.

\_\_\_\_ Windows closed.

\_\_\_\_ Doors to spaces locked, front and back gates locked. Return key to office or after-hours lock box.

**KITCHEN:**

\_\_\_\_ Floors swept and mopped. Counters and stove wiped off.

\_\_\_\_ Dishes washed, dried, and put away (if any were used).

\_\_\_\_ Remove all group items from refrigerator. Items left behind will be thrown away.

\_\_\_\_ Turn off all lights, stove, coffee makers, and the air conditioner.

\_\_\_\_ Front and back door locked. Return key to office or after-hours lock box.

**MAIN CHAPEL:**

\_\_\_\_ Carpets vacuumed.

\_\_\_\_ All trash (flower petals/paper/etc.) collected from pews and entry way and taken to dumpster  
 (between tennis courts and BLDG 150)

\_\_\_\_ Sound system, microphone, and projector turned off.   
 \*\*\*Sound system is not to be adjusted in any way other than the Master Volume. Please refrain  
 from adjusting, unplugging, moving plugs, or attempting to reconfigure in any way\*\*\*

\_\_\_\_ Lock doors (and gates if used). Return key to office or after-hours lock box.

CLEANING GEAR – ALL CLEANING GEAR IS LOCATED IN THE CLEANING LOCKER NEAR RESTROOMS. Please return all cleaning materials to their proper storage location. *DO NOT leave in the classrooms or other facilities.*

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_