



Army Community Service Family Outreach Center and Annex Request



POC Rank & Name _____ Date Reserved _____

Sponsoring Unit / Organization: _____ Work Phone _____

Cell Phone: _____ Email: _____

Commander's Signature of Event Approval: _____

Commander's Name/Email/Phone Number: _____

Type of Function: _____

Date of Event _____ Begin Time: _____ End Time: _____

Requested Area

A. Lobby Area

B. Classroom

ANNEX
C. Entire Building

General Terms & Conditions

- ___ • **Keys must be returned no later than 1300 hours, the next business day, to the Command Support Center, building 35200. Commander or 1SG must sign for key for weekend events.**
- ___ • Applicant must remain on premises during the reserved period and is responsible for the venue in the absence of ACS staff.
- ___ • Applicant is responsible for the condition of the Family Outreach Center/Annex when applicable after the use of the facility. Cleaning of areas used must be accomplished immediately upon completion of function/event (same day). Applicant is responsible for performing the following cleaning tasks:
 - ___ • Wipe off surfaces of tables
 - ___ • Restore room to original design (furniture placement)
 - ___ • Clean bathrooms
 - ___ • Remove all trash, replace trash bags in receptacles, clean up any scattered trash
 - ___ • Sweep and mop floor (Swiffer provided)
 - ___ • Wipe all counters
 - ___ • Clean microwave, if used
 - ___ • Wash dishes, clean sink when done
 - ___ • Please note: you must bring your own supplies: plates, cups, napkins, tablecloths, utensils, ice, etc. Pots and pans, kitchen towels, dish-washing detergent must also be provided
 - ___ • Check and secure all doors and deadlocks before leaving.
- ___ • **NO ALCOHOLIC BEVERAGES, SMOKING OR PETS/ANIMALS** of any kind permitted on the premises.
- ___ • Use of the facility for fundraising purposes is strictly prohibited.
- ___ • All doors, deadlocks and windows must be secured before leaving the building.
- ___ • If property is stolen, the applicant will be subject to a Report of Survey investigation.

Applicant Signature & Date

Please email form to: usarmy.gordon.imcom.mbx.acs-social-media@mail.mil

FOR OFFICE USE ONLY

Request Approved: ___ Yes ___ No Approving Authority _____

*If no, reason for denial _____