

Kitchen Booking Request Form



Campbell River Baptist Church

260 S Dogwood St. | Tel: 250-287-8831 | office@crbaptist.bc.ca | www.crbaptist.bc.ca

Please complete this form to request the use of the CRBC kitchen. Return it to the CRBC facility director for approval. Submission of this form does not guarantee your booking until confirmation is received by email. If you don't hear back within 7 working days, contact irwin@crbaptist.ca.

Contact Information

Name of Ministry/Group/Individual:
Contact Person:
Phone:
Email:

Event Details

Date(s) Requested:	
Start Time:	End Time:
Type of Activity (Check all that apply): <ul style="list-style-type: none"><input type="checkbox"/> Preparing and serving a hot meal<input type="checkbox"/> Preparing and serving a cold meal or baked goods<input type="checkbox"/> Providing hot/cold beverage service only<input type="checkbox"/> Potluck<input type="checkbox"/> Other (please describe):	
Is this for a CRBC Program? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Does this include any other room use? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, which room?	

Kitchen Use Guidelines

1. Do you understand and agree to maintain the high standard of cleanliness required in our kitchen? *(e.g all counters cleared, cleaned and sanitized after use and all food leftovers taken away).*

Yes ☐ No ☐

2. Do you have someone who understands how to use the commercial dishwasher and sanitize all dishware?

Yes ☐ No ☐

3. Do you understand how to use the countertop sanitizing and cleaning solutions provided?

Yes ☐ No ☐

Additional Information

Please include any special requests or additional information related to your booking:

Acknowledgement

By signing this form, I agree to adhere to the policies and guidelines for kitchen use as outlined by CRBC. I understand that failure to comply may result in loss of kitchen privileges.

Applicant Signature: _____

Date: _____

Office Use Only

Approved By: _____ Date: _____ ☐ Email Sent