

Access Card Number _____

Alpharetta Presbyterian Church

Access Control Request Form



Name _____

Address _____

Phone _____

E-Mail _____

Group _____

Date of Meeting/Event _____

Room(s) Reserved _____

If ongoing, what is the frequency? _____

Beginning time for access _____ Ending time _____

Please Note: The access card belongs to Alpharetta Presbyterian Church and must be returned at the conclusion of the above event, unless the event is recurring. Internal groups, including those chartered by APC, will be issued cards based on the needs of the group. External groups will be issued up to two cards. If additional cards are requested, a \$10.00 non-refundable fee will be assessed on each additional card for external groups.

In case of a lost card, if an individual requests a replacement card, there will be a \$10.00 non-refundable fee regardless of group status. Access cards will be deactivated upon termination of this request. The access card is not to be loaned to anyone.

By signing below, you acknowledge that you have received the access card and will accept responsibility for it.

Signature _____

Date Received _____ Date Returned _____