## **APPLICATION FOR USE OF CHAPEL FACILITIES**

Information contained on this form is maintained under the Systems of Records Notice NM05512-2, Badge and Access Control System (August 15, 2007, 72 FR 45798). **AUTHORITY**: 10 U.S.C. 5013, Secretary of the Navy; 10 U.S.C. 5041, Headquarters, Marine Corps; OPNAVINST 5530.14C, Navy Physical Security; Marine Corps Order P5530.14, Marine Corps Physical Security Program Manual; and E.O. 9397 (SSN). **PRINCIPLE**: Individuals considered or seeking consideration for access to space under the control of the Department of the Navy/combatant command and any visitor (military, civilian, or contractor) requiring access to a controlled facility. **PURPOSE**: To control physical access to DoD, Department of the Navy (DON) or U.S. Marine Corps Installations/Units controlled information, installations, facilities, or areas over which DoD, DON or USMC has security responsibilities. **ROUTINE USE**: In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3). **DISCLOSURE**: Mandatory for access.

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Individual eligibility for use Services Identification Ca					primar					ssion of a	a Uniformed	
Date of Application			Vedding		Wed	ding Rehearsal		Funeral/Memo	rial	Other		
Chapel Site: CRP Command Religious						Program Type of Event:						
Command/Organization:												
Requestor's Name: Phone #:					:	E-mail Address:						
APPLICATION DATA												
Date of Rehearsal:		Time of Rehe	nearsal:			Date of Event:			Time of Event:			
Space (s) Requested:		Sanctuary			(	Religious Education Center Ki				nen	Nursery	
Special Requirements	s:	Units/organ	izations	s are resp	onsib	le for setting up,	break	king down, and	d cleaning, the	eir own e	events.	
Special Requirements: Units/organizations are responsible for setting up, breaking down, and cleaning, their own events.  Piano/organ Audio/ Visual Equip Liturgical Supplies (List Items):												
WEDDING DATA  The groom, bride, or either parent may serve as the primary participant.												
Name of Groom:						Name of Bride:						
Work #:	Home #:		Cell #:		Work #:		Home #: Cell		Cell #:	II #:		
E-mail Address:						E-mail Address:						
Command:					Command:							
Faith Background:						Faith Background:						
OFFICIATING CLERGY INFORMATION  Clergy refers to chaplains and civilian church officials including priests, ministers, rabbis, elders, etc., who are authorized by the State of North Carolina to perform religious ceremonies. A copy of the State authorization must be on file.												
Print Name						Signature						
Officiating Chaplain/Clerg	ıy's Phone	Number:										
Officiating Chaplain/Clerg	y E-mail A	ddress:										
COMMAND SIGNATURES												
Recommendation: Approved Disapproved Chapel Pastor S						Signature				Date	Date	
Recommendation: Approved Disapproved Command Chap						plain Signature				Date	Date	

MCIEAST-MCB CAMLEJ/CHAP/1730.9/3 (Rev 7/14)

PREVIOUS EDITIONS ARE OBSOLETE

ADOBE 9.0

## During the week prior to your event, you must schedule a walk-through of the chapel spaces with the Religious Program Specialists /Chapel Manager who staff the chapel program to acknowledge agreement to the following:

- a. No furnishings or property may be moved or repositioned without the permission or supervision of the Religious Program Specialist/Chapel Manager.
- b. ONLY the Religious Program Specialists/Chapel Manager may adjust the sound system.
- c. Upon completion of ceremony / event the condition of the Chapel spaces must be restored to the degree of cleanliness that will facilitate immediate use by others. By submitting this request you hereby agree to clean up after your program.

## Guidelines for use of space:

- a. Only specifically assigned spaces and equipment will be used for an event. Equipment normally employed in and designed for sacramental/worship will not be used for secular purpose.
- b. Assigned spaces will be available 1 hour prior to the scheduled time of the event and 1 hour after the conclusion of the event. Late starts are not permitted. Weddings will be granted a maximum of 2.5 hours.
- c. Floral arrangement will not be affixed to the furniture or walls of the assigned spaces through the use of tapes, pins, nails, staples, or any other fastener which could leave a mark or residue on the furniture or walls. After consultation with the Religious Program Specialist/Chapel Manager, flowers may be affixed to the end of pews by tying on with ribbons. Floral arrangements may be placed in the chancel/pulpit areas only in accordance with specific approval from officiating clergy. The eligible sponsor must remove all decorations and floral arrangements from the assigned space immediately after the event.
- d. Candles on the altar may be used. Any other candles used must be the drip-less type provided by the local florist, with protection provided on the floor.
- e. Throwing rice, birdseed, confetti or other similar material is not permitted in or outside the spaces assigned.
- f. Swords, rifles, and weapons of any kind, including replicas or facsimiles, are not permitted within a chapel or other worship space. Honor guards are permitted, but must leave weapons outside or in the entryway, and the archway must be formed outside the building.
- g. Alcoholic beverages, other than for sacramental use, is not permitted in any space. Tobacco use is not permitted in any space.

## By the signature below, the unit sponsor certifies that this event will comply with the instructions contained and agrees to and is responsible for the following:

- a. Appropriate use and care of the required space.
- b. The conduct of and/or damage caused by participants, consultants, florist, photographers, and guests.
- c. Arrangements with security officials for access to the installation for any civilians attending the event.
- d. Arrangements for service of an organist and clergy (or other religious official) financial or otherwise. The name and phone number of an approved organist will be supplied by the Chaplains' office.
- e. I understand that an RP will be provided by the sponsoring chaplain.

Responsible/Sponsoring ID Card						
Print Name	Signature					
Phone Number:	E-mail Address:					
Sponsoring Chaplain Information						
Print Name	Signature					
Phone Number:	E-mail Address:					
Supporting RP Information						
Supporting RP/CA: (Print Name)	Signature					
Phone Number	E-mail Address:					

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