



Trinity United Church of Christ

(Evangelical and Reformed)

40 West Pine Street, Palmyra, PA 17078

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Article I. E-mail: info@trinitypalmyra.org

Key Administration Form

Request Type (check one):

- Request New Keys
- Update Church Records
- Return of Keys
- Change Key Type (i.e. change access rights)
- Report Lost Keys
- Other (please specify): _____

Key Usage (check all that apply):

- Worship support.
- Access to Church Office or Pastor's Office.
- Christian Education responsibilities.
- Property/Maintenance responsibilities.
- Paid staff member or Consistory officer.
- Support of outside organization (please specify): _____
- Other (please explain) _____

I, _____ (please print), do hereby acknowledge receipt of the following key(s) to Trinity United Church of Christ.

Key Code (Master, A1, A2, etc.) - **Key Number**

Door Access

I agree to return this/these key(s) when I am no longer working with Trinity United Church of Christ as an Elder/Deacon, serving on a Commission, or serving the church in any other capacity. Further, I agree not to allow copies to be made of this/these key(s) while it is in my safe keeping.

Signature

Date

(FOR OFFICE USE ONLY)

Approval Signature (Consistory President)

Date Approved

Completion Date

Key Returned Date

Key Code (Master, A1, etc.) - **Key Number**

Door Access

Name of Person Distributing Key(s)

Date

Date Key(s) Returned - Key Code (Master, A1, A2, etc.) - Key Number - Name of Person Receiving Return Key(s)

Door Access

Comments: _____

