



FACILITY USE REQUEST FORM

OFFICE USE ONLY:
Date Scheduled:

Today's Date: Event Name:

Organization:

Contact Person: Position:

Address: City/State/Zip:

Primary Phone: Secondary Phone:

E-mail: Parish ID:

Intended use of facility? How many People?

Room Requested: Church St. Michael A, B or C St. Gabriel SR Hall Old Church, Room #: Other:

Second Choice Church St. Michael A, B or C St. Gabriel SR Hall Old Church, Room #: Other:

Dates Required: FROM: TO:

Times Required: BEGINNING: ENDING:

SET-UP TIME: (minutes) CLEAN-UP TIME: (minutes)

Frequency: Daily Weekly Biweekly Monthly

Other:

Exceptions:

Facility use guidelines that must be followed:

- NO ALCOHOL ALLOWED ON PREMISES.
NO SMOKING ALLOWED ON PREMISES.
CHILDREN MUST BE SUPERVISED BY AN ADULT AT ALL TIMES.
TABLES AND CHAIRS MUST BE RETURNED TO THEIR APPROPRIATE PLACE.
ROOM MUST BE CLEANED AND TRASH TAKEN OUT AT THE END OF THE MEETING OR EVENT.
PARISH OFFICE MUST BE NOTIFIED OF ANY CHANGES OR CANCELLATIONS

I will take responsibility for all rules to be followed

(Sign Here)

Thank you for your assistance in keeping our facilities and grounds in immaculate condition.