



St. Theresa Catholic Church and School

Event and Meeting Space REQUEST FORM

Today's Date: _____ ***Form must be filled out completely for approval**

Contact Information

Contact Name: _____ Phone Number: _____
 Organization/Ministry: _____ Email: _____

Event Information

Event Name: _____ Is this a PUBLIC event? Yes No
(to be included in Calendars & Website)

Event Description: _____

Event Date: *(Please attach a sheet if more space is needed if all year and include a list of days not needed.)*

Event Date(s)	Event Start Time	Event End Time	Set up Time	Event Teardown Time

Area(s)/Location(s) Requested:

- | | | |
|---|--|---|
| <input type="checkbox"/> Church | <input type="checkbox"/> Gymnasium | <input type="checkbox"/> Family Center |
| <input type="checkbox"/> Library | <input type="checkbox"/> Elmer Hall-Great Room | <input type="checkbox"/> Elmer Hall: 1st choice _____ |
| <input type="checkbox"/> Classroom(s) _____ | <input type="checkbox"/> Other Space: _____ | <input type="checkbox"/> Elmer Hall: 2nd choice _____ |

Estimated Attendance: _____ Adults _____ Children **Will food or drink be served?** _____

Set up Information *Requested furnishings/Equipment*

* If setup is needed, a diagram must be attached with request

Tables: Round (# _____)	Tables: 6ft Rect (# _____)	Chairs (# _____)
Television / Projector	DVD Player	MIC & Speaker
Podium	Extension Cord	Other: _____

Additional Set up Details: _____

For Internal Office Use:

_____ Ministry/Admin Approval	_____ Scheduled
_____ Facilities Notified	_____ Event Confirmed with Requestor
_____ Work Order Submitted	_____ Default Set Up