

Church of St. Joseph

39 North Carll Avenue • Babylon, New York 11702-2701

(631) 669-0068

Facility Request Form

Office Use Only:

Date Received: ___/___/___

Date Entered: ___/___/___

Today's Date (mm/dd/yy): _____

Ministry/Organization*Name: _____

Event Date (mm/dd/yy): _____ Event Name: _____

Contact Person: _____ Email address: _____

Phone #: _____

Which Facility* do you wish to use? _____

Second Choice? _____ Handicap Accessible **Y** ___ **N** ___

Dates Required: From: _____ To: _____

Time Required: Start Time: _____ End Time: _____

Set Up Time: _____ minutes Clean Up Time: _____ minutes

What frequency do you require? (daily, weekly, monthly, bi-monthly, day of week, etc.): _____

Any exceptions to the frequency? (specific dates, months etc.): _____

Are maintenance and room set up required: Yes _____ No _____

Indicate items needed and special set up on the back of this form. Thank you.

(PLEASE INCLUDE FLOOR PLAN WHEN MAKING YOUR REQUEST)

Number of people expected to attend: _____ Are Youth Attending? Yes _____ No _____

*For independent organizations, please be aware that a fee may be charged for use of the buildings and separate contracts and insurance certificates will be requested as necessary.

Fee Received: _____ Check #: _____ Deposit Date: _____

Please Note all State, Local and Diocesan COVID protocols in place at the time of your scheduled event must be followed

Please return form and floor plan to the office as soon as possible. You will be informed if there are any changes or conflicts to the schedule you requested.

Within two weeks, you should receive a schedule of the events for your organization.

Changes or cancellations to this request must be communicated as soon as possible.

Please contact the Facility Use Team via email: calendar@stjbabylon.org

Ministry & Event with Date and Time: _____

Indicate items required:

of tables: _____ # of chairs: _____ Microphone _____ Podium _____ Other: _____

Floor Plan Set Up: