

FACILITY USE REQUEST FORM

DATE OF EVENT _____

TIME OF EVENT _____ TO _____

NAME OF EVENT _____

SPONSORING ORGANIZATION (IF ANY) _____

PRIMARY CONTACT _____

Phone number _____

Cell phone _____

Email address _____

_____ Member of Congregation?

_____ USE OF BOTH MEETING HOUSE AND PARISH HOUSE

Services required:

_____ Minister

_____ Organist/pianist

_____ Sexton (bell ringing, vacuuming, cleaning, snow removal, etc.)

_____ USE OF PARISH HOUSE ONLY

_____ USE OF PARISH HOUSE WITH KITCHEN

Services required:

_____ Minister

_____ Organist/pianist

_____ Sexton

Request received by Building Coordinator _____

Request approved _____

Posted on congregation calendar in Parish House and on website