

Parish: _____

Address: _____

APPLICATION FOR USE OF CHURCH FACILITIES

1. NAME OF APPLICANT _____
(Organization/individual/Church Member)

Title: _____ Phone: _____

Address: _____
Street / State / Zip

2. STATUS OF APPLICANT:
 Church Group Church Member Individual School
 Non-Profit Other (Specify) _____

3. FACILITY & EQUIPMENT YOU WISH TO USE:
 Church Parish Hall Kitchen Undercroft Chairs
 Tables Piano Other (Specify) _____

4. DATE(S) REQUESTED: _____ TIME: From _ to _____

5. NO. EXPECTED TO ATTEND: _____ AGE GROUP: _____

6. DONATIONS, COLLECTIONS OR ADMISSION CHARGES:
WILL BE _____ will not be _____ RECEIVED OR CHARGED.

7. BRIEFLY DESCRIBE THE PROPOSED EVENT: _____

8. NAME OF PERSON(S) IN ATTENDANCE WHO WILL BE RESPONSIBLE FOR
CONDUCT OF ATTENDEES AND CLEAN-UP:

Name: _____

Business Tel.: _____ Residence Tel.: _____

Name: _____

Business Tel.: _____ Residence Tel.: _____

The undersigned applicant hereby gives the Parish permission to verify the information obtained in this application and understands that no date or facility will be held until this application is returned and approved by the Parish.

APPLICANT:

Name: _____

Date _____