

ST. LUCY PARISH
FACILITY/EVENT FORM

Name of the EVENT OR GATHERING:

Parish Group/Organization: _____

DATE(S) of the Event or Gathering: _____

Frequency of the Event:

(weekly, first Monday of the month, etc) _____

TIME: From _____ To _____ (include set-up and clean-up)

Actual start time: _____ Actual end time: _____

FACILITY REQUESTED:

- | | | |
|--|---|--|
| <input type="checkbox"/> Church | <input type="checkbox"/> Annex | <input type="checkbox"/> Faith Formation Office |
| <input type="checkbox"/> * PAC A (large room) | <input type="checkbox"/> Kitchen in the Annex | <input type="checkbox"/> Parish Office Conference Room |
| <input type="checkbox"/> * PAC B (with tables) | <input type="checkbox"/> Lally Center | <input type="checkbox"/> Gym |
| <input type="checkbox"/> * PAC C (no tables) | | |

* In consideration for other groups meeting in the PAC, if you expect the gathering to be loud (music, number of people larger than 50, etc.), please consider reserving the Annex or all PAC facilities.

Comments:

Administrative Staff will confirm scheduling details with:

Name: _____

Email: _____

Phone: _____

Today's Date: _____