

REQUEST TO USE FACILITIES

Ministry heads must complete this form to request to use any OLPH facility. Please submit this form to your staff liaison no less than (7) business days prior event.

Ministry Name: _____ Date Submitted: _____

Requestor's Name: _____ Contact#: _____

Event Date: _____ Start Time: _____ End Time: _____

Event Description: _____ # of people expecting: _____

Special Requests: _____

Preferred Facility (mark one)

- Church (Ch) Conference Room 1 – Parish Office (C1)
 Conference Room 2 – Rectory (C2) Conference Room 3 – Garage (C3)
 Breezeway (B) School Room ____ - indicate which room
 Front of Church (FrontCh) Other (specify): _____

As the head of the _____ Ministry, I or _____ (designee's name) is responsible to leave the facility the way it was when entered. I understand that at the conclusion of this event, the facility door must be locked, and lights off, chairs/ tables/desks/rubbish bins are in its proper place. I also understand that all plates, cups, and food must be disposed in the outside trash bins.

Your staff liaison will notify you within 2 business days (after submission) if this request is approved or not. Subject to availability.

Your Signature: _____ Date: _____

Received by: _____ Date: _____

Signature of Staff Liaison

FOR PARISH OFFICE ONLY:

1. Availability

- Available: Yes ____ No ____
 PDS Date: _____
 Approved By: _____
 Date Staff Liaison Notified: _____

2. Staff Liaison Use

- Date Ministry Head Notified: _____
 Follow Up Date: _____
 (day AFTER event)
 Condition of Facility
 _____ Acceptable
 _____ Not Acceptable (explain below) *