

HOLY FAMILY CATHOLIC PARISH
FACILITY USE APPLICATION

This application is made for the use of parish facilities by parishioners or immediate family for a non-parish event in accordance with the policies and procedures of Holy Family facilities.

Date of Application: _____ (*Date rec'd in parish office*)

1. Parishioner Name/Name of Group: _____
2. Parishioner/Contact Phone Number: _____
3. Parishioner/Contact Address: _____
4. Parishioner/Contact e-mail: _____
5. Name of Event/Purpose: _____ 6. Est. Attendance: _____
7. Day & Date of Event: _____
8. From: _____ AM/PM To: _____ AM/PM
9. Set-up Time Requested: _____ min/hours
10. Clean-up time needed: _____ min/hours

11. Facility Requested:

- | | |
|--|--|
| a. _____ Holy Family Center Hall
____ Formal Area
____ Recreational Area | g. HFC Meeting Rooms (circle)
#3 #4 #6 #7 #9 #10 #11 #17 |
| b. _____ Kitchen | h. St. Joseph Meeting Rooms (circle)
#1 #2A #2B #3 #4 |
| c. _____ St. Mary Hall
____ East
____ West | i. _____ Nursery |
| d. _____ St. Joseph Hall | j. Equipment/Other
____ Sound System—HFC Hall
____ Projection Screen— HFC Hall
____ Bar |
| e. _____ Library | ____ Other _____ |
| f. _____ Sanctuary | |

12. Will alcohol be served? __ Yes __ No Bartender Name/Number _____
13. Will food be served? __ Yes __ No Caterer Name/Number _____
14. Will the kitchen be used for cooking or warming? (circle)

IMPORTANT

- *Set-up is completed by reserving group (assistance with set-up is available upon request)*
- *Clean-up is completed by reserving group (major events are an exception)*
- *Questions, cancellations or rescheduling must be directed to the parish office*

Parish Office Use: Initial as Completed

___ *Date/Time Checked*

___ *Parishioner* ___ *Non-Parishioner*

___ *Event Supervision Secured*

___ *Fees: Rental \$ _____ Event Deposit \$ _____ Security Deposit \$ _____*

Set up/Clean up: \$ _____ Supervision: \$ _____ Dishes/Utensils: \$ _____

Special Events Insurance \$ _____

___ *Business Manager Sign-Off* _____

___ *Pastor Sign-Off* _____

___ *Entered into EMS by* _____

___ *Reservation Confirmation Letter to Applicant with Policies and Procedures*

___ *copy of facility use application*

___ *copy of facility use agreement*

___ *copy of Hold Harmless agreement*

___ *Paper Copy to Deb Clark*

___ *e-mail Copy to Phyllis Andrusiak & Deb Clark*

___ *Security Deposit of \$ _____ Returned _____*

Special Conditions: