

**St. Edward the Confessor Church  
Facility Request for Meetings and Events**

Office Use: Calendar _____ Website _____
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**ORGANIZATION NAME** \_\_\_\_\_

**RESPONSIBLE PARTY:** \_\_\_\_\_

Phone : \_\_\_\_\_

e-mail: \_\_\_\_\_

<b>One-time Meetings or Events~Date(s) Select times and Room requested:</b>							
	event name	Date	Beg time		End time		
			from:		to:		
			from:		to:		
			from:		to:		
			from:		to:		
<b>Room(s) requested:</b>						Other	
Hall	Kitchen	CL5	CL7	CL8	Lounge	_____	_____
~Rooms are assigned based on first requests and availability. ~If a conflicting event arises we will do our best to provide alternate location							
<b>On-going meetings (Please select day for continuous meetings):</b>							
	M	T	W	Th	F	Sat	Sunday
<b>On-going meetings ~ Date(s) and Times requested (mark Room request above):</b>							
	from	end date	Beg time	End time			
	to		from:	to:			
	to		from:	to:			
<b>Frequency:</b>							
(i.e. first and third _____)							
(Monthly/Weekly etc.) _____							
<b>Notes:</b> Please list any set up or Equipment needed (i.e. audio visual, # tables, chairs) :							
_____							
_____							
_____							

Once the dates are set they will be entered on the Church calendar. Please drop off or email any updates  
 NOTE: Meetings will be cancelled during County Level Emergencies

Please return form to Parish office:

*Thank you!*

**For On-going meetings only:**

**Please list any dates you know you will not be meeting:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_