

Requested By Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

Church Campus: \_\_\_\_\_

Date/Dates and Time: \_\_\_\_\_

# Saint Josephine Bakhita Parish Room Reservation Form

Date Received: \_\_\_\_\_

Date Entered: \_\_\_\_\_

All Requests for the use of (SES or SJ) Churches, Meeting Rooms, Parish Center or Lawn Events must be submitted to the office on the ROOM RESERVATION FORM.

Each request will not be entered on the church calendars until the Room Reservation Form is received in the office and verified availability.

SET UP INFORMATION IS REQUIRED UPON SUBMISSION, IF NO SET UP IS NEEDED IT MUST BE NOTED ON THE FORM.

If additional space is needed to communicate your request, please attach a diagram or picture.

### Saint James Church

- Worship Space: \_\_\_\_\_
- Parish Center: \_\_\_\_\_
- Room 1: \_\_\_\_\_
- Room 2: \_\_\_\_\_
- Room 3: \_\_\_\_\_
- FR. Shea: \_\_\_\_\_
- Rectory:
  - Living Rm: \_\_\_\_\_
  - Kitchen: \_\_\_\_\_
  - Conference Rm/Office: \_\_\_\_\_

### Saint Elizabeth Seton

- Worship Space: \_\_\_\_\_
- Room A: \_\_\_\_\_
- Room B: \_\_\_\_\_
- Room C: \_\_\_\_\_
- Room D: \_\_\_\_\_
- Room E: \_\_\_\_\_
- Room F: \_\_\_\_\_
- Room G: \_\_\_\_\_
- Hospitality Area: \_\_\_\_\_

### Furniture/Equipment Requested:

1. \_\_\_\_\_
2. \_\_\_\_\_

### Office Notes:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

### Additional Details/Special Requirements:

Set up assistance required? Yes \_\_\_ No \_\_\_

Breakdown assistance required? Yes \_\_\_ No \_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_